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bbie, a slight, delicate looking, 68 year old woman fell down a flight of stairs onto her basement floor. She didn't break anything.

Abbie is an exception. We'd like to make her the rule.

Abbie lifted weights and took calcium supplements back when movie stars looked glamourous smoking and drinking. She was into exercise and healthy diets before they became vogue. And she walked away from what could have been a very serious injury because of her lifestyle and calcium.

Tums 500 can make a difference.

Today the average American woman gets only about half the calcium she needs to maintain bone strength. Think about what you've eaten today.

1 out of 2 American women over 50 have osteoporosis.

Now is the time to help protect yourself from becoming a statistic. It's never too early. It's almost never too late. Talk to your doctor about alternate therapies and risk factors like age, race and family history. Exercise, even a half hour walk a day, eat right, curb your smoking and drinking.

And take 2 Tums 500 every day.

2 Tums 500 provide 1000 mg. of chewable EffeCal*™, a pure, very absorbable, refined form of calcium.

Learn by example.

Osteoporosis is a disease you can actually help prevent. Which is only good news if you do.

You'll find Tums 500 with the vitamins and nutritional supplements.

*EffeCal is a registered trademark of SmithKline Beecham Consumer Healthcare for calcium carbonate.

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Letters

Implanted Defibrillators

Your article, "Surviving Heart Attacks: The Vital Link" by Jane E. Brody, was a dramatic account of the results of a heart attack. Her description of the possibility of survival if assistance is not received within ten minutes is frightening.

I speak from experience.

Four years ago, I recognized the approach of something definitely wrong. Clammy sweat, trouble in breathing, and awareness of losing consciousness. My wife immediately called 911, and within three minutes, our local fire station responded. Their quick analysis indicated an irregular heart function, and they applied their portable defibrillator. I was unconscious and was unaware of the impact of the shock used to restore a normal heartbeat.

I beat the survival odds by a safe margin because of the nearness of our fire department and the fact that they were equipped with the right equipment.

However, the Brody article omitted one of the latest medical devices currently in use to assist in preventing sudden death from ventricular fibrillation.

After two days in intensive care, and after a family conference, it was decided to go ahead with the installation of an Automatic Implantable Defibrillation System, known medically as AICD. It was installed while they performed a quadruple bypass open-heart operation, and within a few days, I was out of intensive care and on the road to recovery.

Just what is an AICD? The AICD system consists of a pulse generator that activates a battery with electrical leads to send electrical shocks to the heart and restore normal pulse activity. Irregular heartbeat can be arrested with an electrical shock.

Jane Brody's description of home-operated defibrillators is now made obsolete by the AICD. Sewn into the tummy, it's there to activate anytime there is an abnormal pulse beat. Batteries are good for three to five years, and replacement is a simple operation.

I heartily recommend that anyone with potentially serious heart problems consult their cardiac specialist about installing an AICD.

William P. Sloan
San Diego, California

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Pilgrims travel thousands of m... Lourdes to pray to the Blessed ... here to Saint Bernadette o... Abandoned crutches and whee... testimony to the power of ... Blessed Mother's love.

Now the beautiful Virgin whom Bernadette saw clothed in radiant white and holding a rosary has been faithfully painted by the renowned artist Hector Garrido and re-created on a fine porcelain collector's plate. Imagine the sense of grace and hope this inspiring work of religious art will bring to your own home.

"Our Lady of Lourdes," surrounded and embellished in 22k gold, is hand-numbered, comes with a Certificate of Authenticity, and is backed by the Bradford Exchange 365-day guarantee.

It is issued in an edition that's strictly limited, and interest is expected to be strong. So don't risk disappointment, order your plate today. You need send no money now. Simply mail the coupon. Soon Saint Bernadette's vision will be yours to ...

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"Our Lady of ... rdes" ... gold border ... inches

Yo... ...gc

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Name (Please Print Clearly)

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City _____

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*Plus a total of $3.49 postage and handling. Illinois residents add state sales tax. Plate price is higher in Canada.

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Editor's note: The Post *has been writing about the automatic implantable cardioverter defibrillator (AICD) for many years since it was first developed by Dr. Michel Mirowski of Johns Hopkins University. In 1989, we wrote that several thousand were in use. We interviewed Dr. Mirowski on several occasions before his untimely death from cancer.*

One man, wearing such a device after having suffered cardiac arrest earlier, was out playing golf when he "arrested" again. This time, he felt a heavy jolt on his chest. He stopped at the pro shop to call his doctor, who permitted him to finish his golf game. Bravo for Dr. Mirowski's great contribution for keeping heart patients enjoying life! He was ridiculed when he first attempted to popularize his device. We're glad he lived long enough to see it become accepted just before he died.

Honoring Norman Rockwell's 100th

I was delighted to spot the current *Saturday Evening Post* in my local market and to see Norman Rockwell, at his easel, on the cover! It startled me at first; I knew he had passed away many years ago, but I was pleased you were honoring his 100th birthday.

I am proud to own his large book, entitled *Norman Rockwell, Illustrator,* where all the *Saturday Evening Post* covers are displayed.

Many years ago, I enrolled in the "famous artists course" where Mr. Rockwell was on the board of directors. Sorry to say, I never completed the course!

Now I have become a new subscriber of your noble magazine, thanks to Mr. Rockwell!

Barbara Lee
Bradenton, Florida

Will a Kid Eat Crow?

My wife and I have had some good chuckles over the letter so kindly sent by Frederick Hanhisalo of Duxbury, Massachusetts. He wrote in the July/August issue that "Mr. Smith (how shall I put it gently) is getting on in years [here's where my wife chuckled] and has forgotten the true interpretation" (of the lyrics of "Mairzy Doats"). He was, he says, "devastated" to read that I thought the song's next-to-last line should be read as "a kid'll eat ivy too."

Right on one count, wrong on the other. His own version, "And cattle eat ivy too," [that's where I chuckled] is pretty clearly demolished by the *Post*'s having printed the actual lyric, whose line is "A kiddley divey too."

If I'd been wrong, I'd have eaten crow along with my ivy. But by now, I'm sure, Mr. Hanhisalo has thought the matter over and understands that the *kid* in the song is a newborn goat. A kid will, indeed, eat ivy—and almost everything else. (I never actually saw one eat a mud pie, but don't doubt the possibility.) When the word *kid* refers to a child, it's purely figurative. None of us kids who have chewed on English grammar will believe that "a kid'll eat ivy" is either vulgar or ungrammatical, or that the *kid* in the song was anything but a hungry young goat.

No doubt Mr. Hanhisalo, by the time he has joined me in getting along in years, will not have forgotten that the song means "a kid'll eat ivy, too."

Wen Smith
Ashland, Oregon

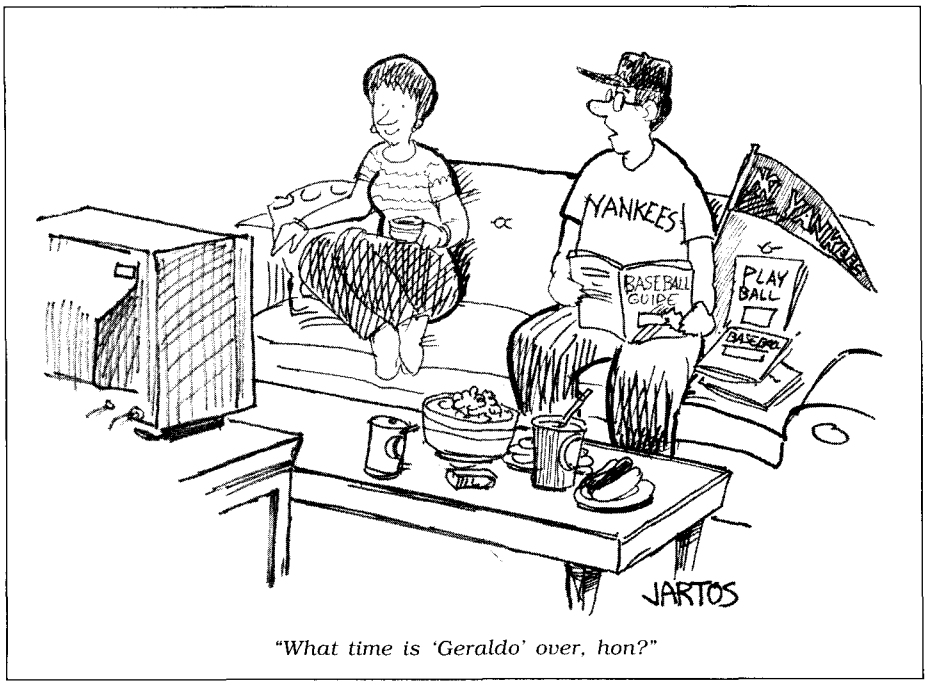
Conflicting Comments

I am writing in regard to a recent ad you carried for B-SAFE. My family and I found it very offensive and misleading. I am the mother of a beautiful, intelligent daughter who was born 3½ years ago with spina bifida. If you could see her and the many other children and adults we know who have spina bifida, you would not call this birth defect "horrible" and "devastating." Contrary to the tone of the ad, there can be a good quality of life with spina bifida.

A woman who has already had a child with a neural tube defect needs to take 4 mg of folate per day to reduce her risk of the defect recurring. There may be some genetic reason why her body does not absorb enough folate, and therefore, she requires this megadose. Therefore, 400 mcg would probably not be enough to prevent the defect in her offspring.

Amy Scherschligt
Carmichael, California

I am the mother of a spina bifida child (now 21), and I am writing to tell you how pleased I am to see there is now something women can take to help prevent neural tube defects. My daughter is very special, and my heart breaks to think 4 mg of folic acid per day



"What time is 'Geraldo' over, hon?"

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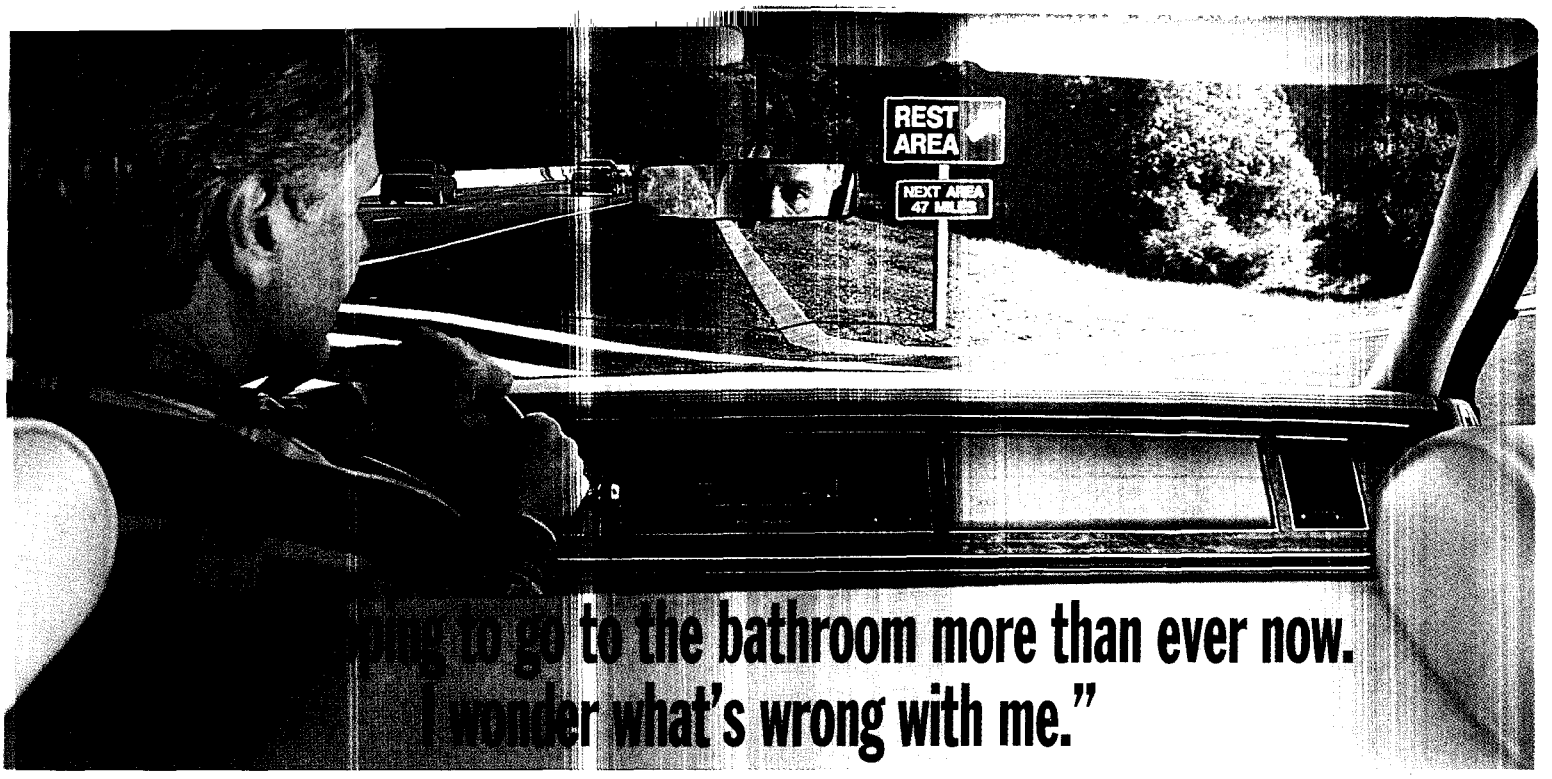


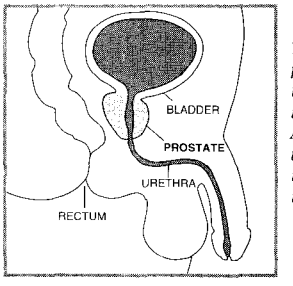
"...going to go to the bathroom more than ever now. I wonder what's wrong with me."

Your urinary symptoms may be caused by a condition called benign prostate enlargement or BPH. BPH is not cancer and does not lead to cancer, although the two conditions can exist at the same time. Remember, only a doctor can evaluate your symptoms and their possible causes.

Is this you?	Yes	No
Do you get up more than once or twice a night to urinate?	☐	☐
Do you often have sudden, uncontrollable urges to urinate?	☐	☐
Do you have a hesitant or slow urine stream?	☐	☐
Do you have a frequent need to urinate?	☐	☐

If you answered yes to even one question, tell your doctor.

Today, symptomatic BPH can be treated by your doctor in several ways. The options are monitoring the condition with regular checkups, surgery, or oral medicines. One oral medicine is PROSCAR, the only prescription medicine for the treatment of symptomatic BPH that can shrink the prostate.



The prostate surrounds part of the urethra, the tube that carries urine from the bladder. As the prostate enlarges, it can squeeze the urethra and cause urinary problems.

PROSCAR works by blocking a hormone that can cause the prostate to enlarge. *But it is important to know: PROSCAR doesn't work for everyone. Although the prostate may shrink, there may not be an improvement in urinary symptoms. However, in clinical studies with PROSCAR, some men have seen an improvement in their urinary symptoms after 2 weeks. Others have found that PROSCAR took up to several months to help them.* Because all men are different, you and your doctor will need to determine how PROSCAR is working for you.

If you have any urinary symptoms, see your family doctor or a urologist soon, and ask about PROSCAR. For free information to help you discuss your symptoms with your doctor, call 1-800-214-7006.

For the treatment of symptomatic BPH

PROSCAR® 5mg
(FINASTERIDE)

The only medicine that can shrink the prostate.

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Please see patient information on the next page.

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PATIENT INFORMATION ABOUT PROSCAR® (Prahs-car)
Generic name: finasteride (fin-AS-tur-eyed)

PROSCAR is for the treatment of symptomatic benign prostatic hyperplasia and for use by men only.

Your doctor may prescribe PROSCAR if you have a medical condition called benign prostatic hyperplasia or BPH. This occurs only in men.

Please read this information, as well as the leaflet which accompanies your medication, before you start taking PROSCAR. Also, read the leaflet each time you renew your prescription, just in case anything has changed. Remember, this leaflet does not take the place of careful discussions with your doctor. You and your doctor should discuss PROSCAR when you start taking your medication and at regular checkups.

What is BPH?

BPH is an enlargement of the prostate gland. After age 50, most men develop enlarged prostates. The prostate is located below the bladder. As the prostate enlarges, it may slowly restrict the flow of urine. This can lead to symptoms such as:

- a weak or interrupted urinary stream
- a feeling that you cannot empty your bladder completely
- a feeling of delay or hesitation when you start to urinate
- a need to urinate often, especially at night
- a feeling that you must urinate right away.

Treatment options for BPH

There are three main treatment options for BPH:

- **Program of monitoring or "Watchful Waiting".** If a man has an enlarged prostate gland and no symptoms or if his symptoms do not bother him, he and his doctor may decide on a program of monitoring which would include regular checkups, instead of medication or surgery.
- **Medication.** Your doctor may prescribe PROSCAR for BPH. See **"What PROSCAR does"** below.
- **Surgery.** Some patients may need surgery. Your doctor can describe several different surgical procedures for BPH. Which procedure is best depends on your symptoms and medical condition.

What PROSCAR does

PROSCAR lowers levels of a key hormone called DHT (dihydrotestosterone), which is a major cause of prostate growth. Lowering DHT leads to shrinkage of the enlarged prostate gland in most men. This can lead to gradual improvement in urine flow and symptoms over the next several months. However, since each case of BPH is different, you should know that:

- Even though the prostate shrinks, you may NOT see an improvement in urine flow or symptoms.
- You may need to take PROSCAR for six (6) months or more to see whether it helps you.
- Even though you take PROSCAR and it may help you, it is not known whether PROSCAR reduces the need for surgery.

What you need to know while taking PROSCAR

- **You must see your doctor regularly.** While taking PROSCAR, you must have regular checkups. Follow your doctor's advice about when to have these checkups.
- **About side effects.** Like all prescription drugs, PROSCAR may cause side effects. Side effects due to PROSCAR may include impotence (or inability to have an erection) and less desire for sex. Each of these side effects occurred in less than 4% of patients in clinical studies. In some cases side effects went away while the patient continued to take PROSCAR.

  Some men taking PROSCAR may have a decrease in the amount of semen released during sex. This decrease does not appear to interfere with normal sexual function. Rarely, some men have reported breast swelling and/or tenderness or allergic reactions such as lip swelling and rash.

You should discuss side effects with your doctor before taking PROSCAR® (Finasteride) and anytime you think you are having a side effect.

- **Checking for prostate cancer.** Your doctor has prescribed PROSCAR for symptomatic BPH and not for cancer—but a man can have BPH and prostate cancer at the same time. Doctors usually recommend that men be checked for prostate cancer once a year when they turn 50 (or 40 if a family member has had prostate cancer). These checks should continue while you take PROSCAR. PROSCAR is not a treatment for prostate cancer.
- **About prostate specific antigen (PSA).** Your doctor may have done a blood test called PSA. PROSCAR can alter PSA values. For more information, talk to your doctor.
- **A warning about PROSCAR and pregnancy.**

  PROSCAR is for use by MEN only.

  PROSCAR is generally well tolerated in men. However, women who are pregnant, or women who could become pregnant, should avoid the active ingredient in PROSCAR.

  If the active ingredient is absorbed by a woman who is pregnant with a male baby, it may cause the male baby to be born with abnormalities of the sex organs. Therefore, any woman who is pregnant or who could become pregnant must not come into direct contact with the active ingredient in PROSCAR.

Two of the ways in which a woman might absorb the active ingredient in PROSCAR are:

Sexual contact. Your semen may contain a small amount of the active ingredient of the drug. If your partner is pregnant, or if you and your partner decide to have a baby, you must stop taking PROSCAR and talk to your doctor. If your partner could become pregnant, proper use of a condom can reduce the risk of exposing her to your semen (discuss this further with your doctor).

Handling broken tablets. Women who are pregnant or who could become pregnant must not handle broken tablets of PROSCAR.

PROSCAR tablets are coated to prevent contact with the active ingredient during normal handling. If this coating is broken, the tablets should not be handled by women who are pregnant or who could become pregnant.

If a woman who is pregnant comes into contact with the active ingredient in PROSCAR, a doctor should be consulted. Remember, these warnings apply only if the woman exposed to PROSCAR is pregnant or could become pregnant.

How to take PROSCAR

Follow your doctor's advice about how to take PROSCAR. You must take it every day. You may take it with or between meals. To avoid forgetting to take PROSCAR, it may be helpful to take it the same time every day.

Do not share PROSCAR with anyone else; it was prescribed only for you.

Keep PROSCAR and all medicines out of the reach of children.

FOR MORE INFORMATION ABOUT 'PROSCAR' AND BPH, TALK WITH YOUR DOCTOR. IN ADDITION, TALK TO YOUR PHARMACIST OR OTHER HEALTH CARE PROVIDER.

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might have prevented this birth defect!

There should be women willing to speak (I am) to young, and not so young, women of childbearing age to let them know how serious this is and how important folic acid can be. Let those who know help those never to have to know! Mothers—speak out! Let's stop neural tube defects! Now!

Jan Barney
Florence, Alabama

Brian Moore

Karen Braddom

Who Reads Your Letters?

Editor's note: Post *interns Brian Moore and Karen Braddom spend many hours responding to reader requests and researching answers to medical questions. Articles by these talented young journalists will appear in future issues.*

Hair Thinning

I'm almost certain that I read about the following in one of your editions, but as I pass on the magazine to my granddaughters, I can't trace it.

The article was about glaucoma drops, and it mentioned two that could cause hair thinning. I should have saved the article, but didn't.

Blanche Lapauk
Brookfield, Illinois

Editor's note: In looking through the 1994 Physician's Desk Reference, we found two eye preparations indicated for the treatment of glaucoma which do list hair loss as a possible adverse reaction—Timoptic and Betoptic. There may be others.

Pernicious Anemia at Any Age

I am writing in regard to the pernicious anemia article in the July/August '94 *Post*. You interviewed Dr. Crosby who said that childbearing women don't get pernicious anemia.

I beg to differ. Forty-two years ago, I collapsed and tests showed that I had pernicious anemia.

At the time, I had two little girls, four years old and six months old. Now at age 69, I still get a shot every

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month. I would like an explanation on why this Dr. Crosby thinks only old people get pernicious anemia.

I love the magazine and read your articles faithfully.

Wanda L. Obrecht
New Hudson, Michigan

Critic in Kraków

On page 86 of the May/June '94 *Saturday Evening Post*, in the review of James C. Humes' book, *The Wit and Wisdom of Winston Churchill*, I was surprised to see a serious misquotation of the "Few" speech. It should read: "Never in the field of human *conflict* was so much owed by so many to so few."

I look forward to each issue of the *SatEvePost*, only wishing it was the actual weekly of the good old days. By the way, I am English and borrow the copy of your magazine from the American Consulate library.

Mrs. C.S. Acheson-Waligórska
Kraków, Poland

Picture This!

We found this picture among my uncle's effects at his death. My uncle,

Richard A. Brouhard, was born July 4, 1889, in Beaver City, Nebraska (a Fourth of July baby). My aunt was born May 22, 1892, in Cambridge, Nebraska. They had been married 76 years when he died.

My uncle was a professional photographer and took this picture of the two of them between 1916 and 1918, we think.

What issue of the *Post* they are looking at, we can't even guess. They had no children and lived together all those years, happy and simply satisfied with each other's company and that of their many friends.

Kenneth Brouhard
Vancouver, Washington

Editor's note: The issue your uncle is holding is the February 26, 1916, Saturday Evening Post.

Call the AARP!

In the March/April '94 issue of *The Saturday Evening Post,* a subscriber referred to a vitamin used by Bob Hope, called Surbex, as not being obtainable at the pharmacies in Skokie, Illinois. The AARP carries this vitamin; call 1-800-456-2277.

Melva D. Welch
West Long Branch, New Jersey

In reading the "Letters" in the March/April '94 issue, I was interested in the one from Shirley Thiessen of Portland, Oregon, since I, too, take Slow-Mag. The editor referred her to the manufacturer for a source of Slow-

continued on page 14

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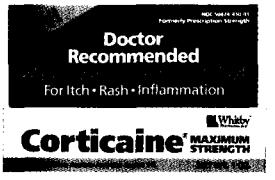

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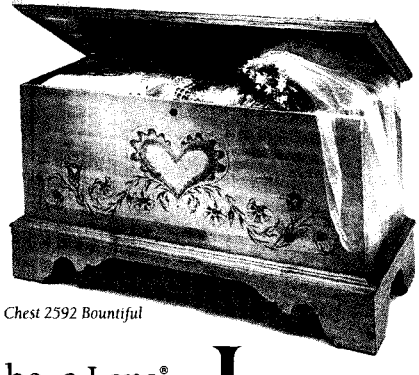
Even though I had spent the last three weeks on the *phone* telling this perfect stranger everything from my favorite movie to my views on the economy, when the doorbell finally rang I remember making a *vow* that no matter what, this would be my last blind date -- and *it* was.



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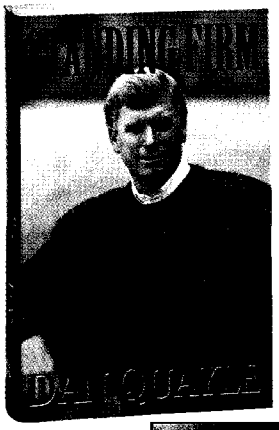

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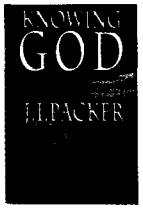

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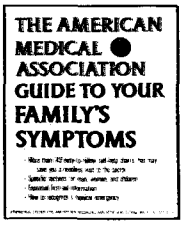

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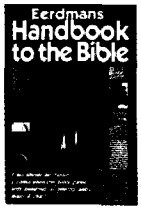

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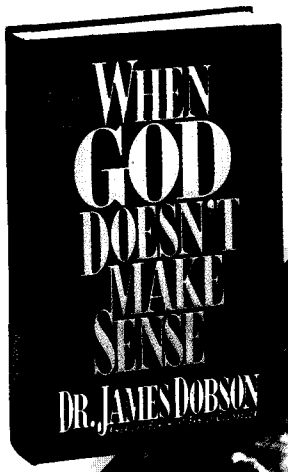

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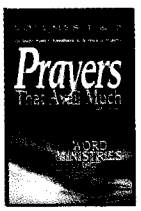

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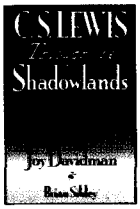

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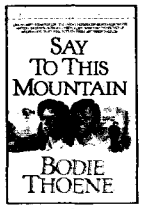

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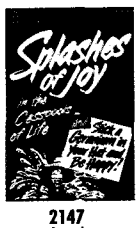

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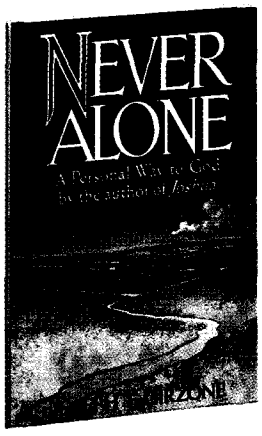

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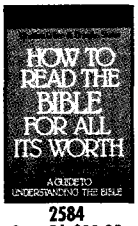

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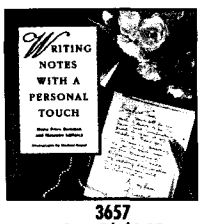

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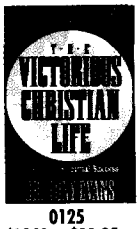

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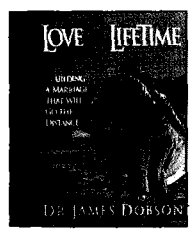

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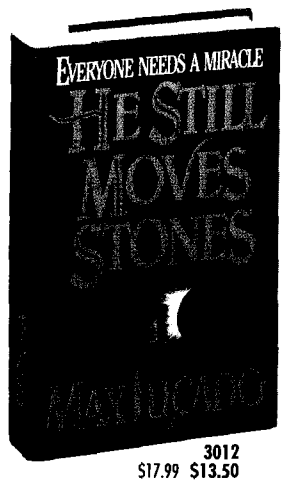

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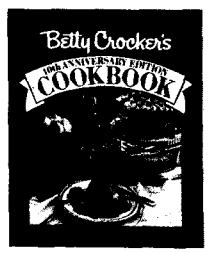

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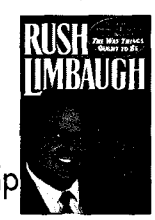

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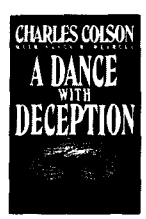

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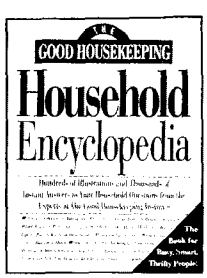

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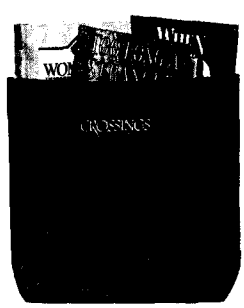

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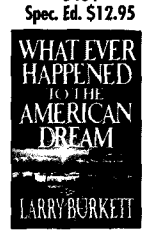

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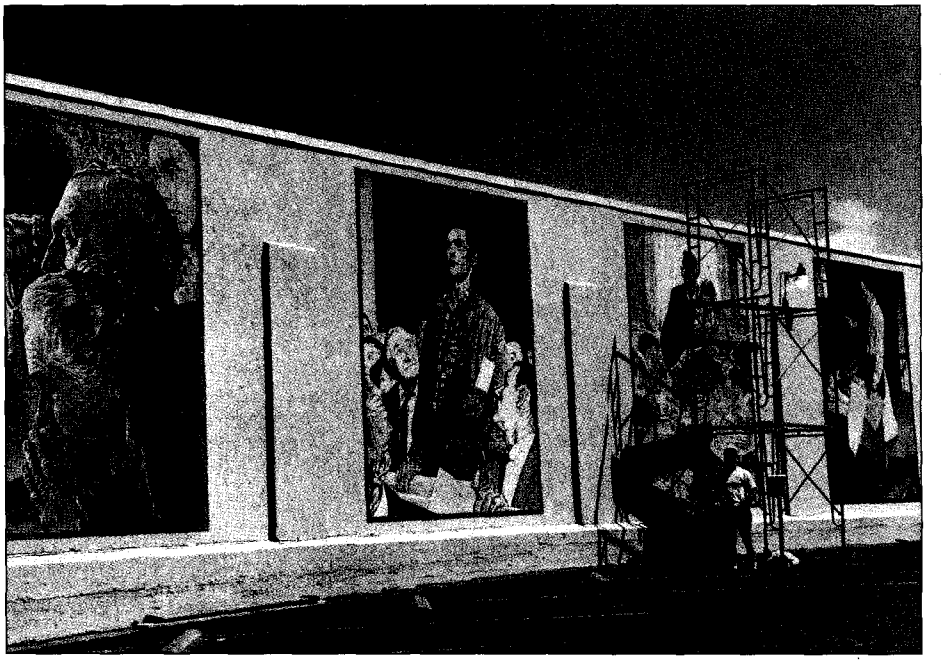
Mag in her area. Since a large portion of your readership is probably 50 or over, I was surprised when you did not give AARP a plug. Slow-Mag is available through your AARP pharmacy. I always have difficulty locating it in the AARP catalog, but just enter it on your order form, and they will supply it for you.

James K. Gaddy
Laredo, Texas

Rockwell 20 Feet Tall

No doubt you have many photos of these to put into your magazine, but in the event you don't, here's one of many shots I took of Rockwell murals. I thought they were exceptionally good for town amateurs. My husband, Frank, is under the scaffolding.

Rose Marie Smith
Clackamas, Oregon



Editor's note: The 20-foot-high murals of Norman Rockwell's Four Freedoms *decorate the walls of the Masonic Lodge in Silverton, Oregon. They were painted by local artist David McDonald and are the first in a series of public art works the town plans to install. On July 2, Silverton held a parade dedicating the murals to its war veterans. Why Rockwell? "We believe that Silverton is a Rockwell kind of town," says Colleen Martin, director of the Silverton Chamber of Commerce.*

In "Jeopardy!"

In his somewhat effervescent confession to being addicted to "Jeopardy!" the quick-quiz TV program ("In the Shadow of 'Jeopardy'!" July/August '94), Wen Smith seemed nigh exuberant. But then, agility of mind and dexterity of tongue are indispensable for enjoying the rapid-fire show.

Still, to catch Alex Trebeck in an Elizabethan grammatical false step is a rarity, indeed. The imperfect phrase "a cup runneth over," with an indefinite article, does conjure up a weird image of a small drinking vessel with nimble green legs scampering across the lawn.

But I have a quibble of my own. Although King David is often alluded to as the Psalmist, the entire Book of Psalms cannot be ascribed to him alone—not even through ecclesiastical tradition.

William Dauenhauer
Wickliffe, Ohio

At Ten, Too Young to Sell *Post*

In 1934-35, my brother got a job selling *The Saturday Evening Post*. He soon lost interest so, with dollar signs in my eyes, I took over! Before long, I was selling *The Saturday Evening Post, Ladies Home Journal, Country Gentleman,* and *Liberty*. One day a week, I took my bag and books and went to the corner of 11th and K Streets in Sacramento. I would stand there and call, "*Saturday Evening Post,* best on the coast, only a nickel. Half a dime keeps you reading all the time!"

Business was booming, and I was feeling quite the millionaire when police came and took me home, telling my parents that a girl ten years of age could not do this.

Colleen C. Smitten
West Sacramento, California.

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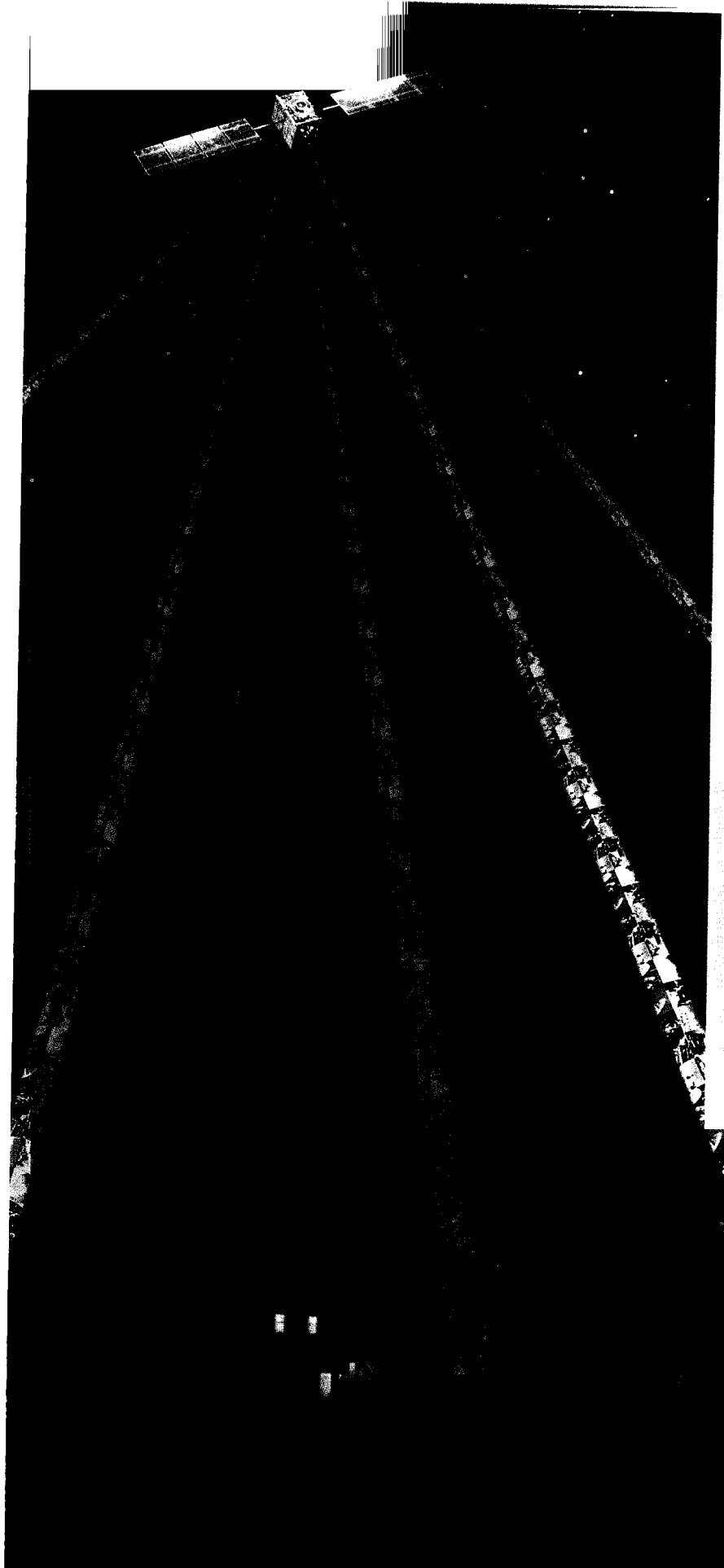

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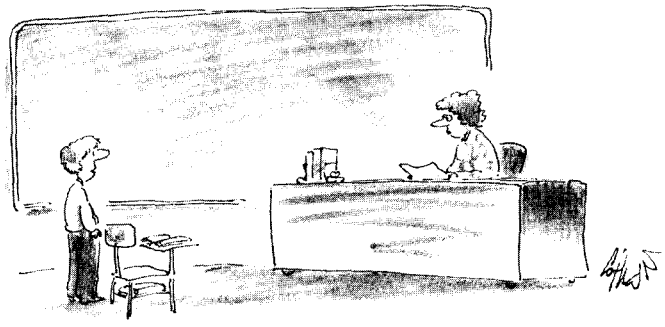
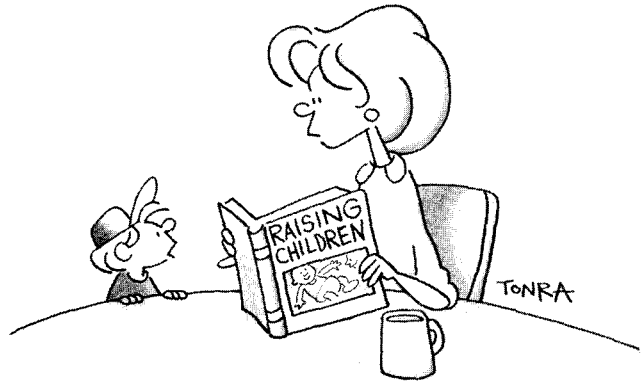
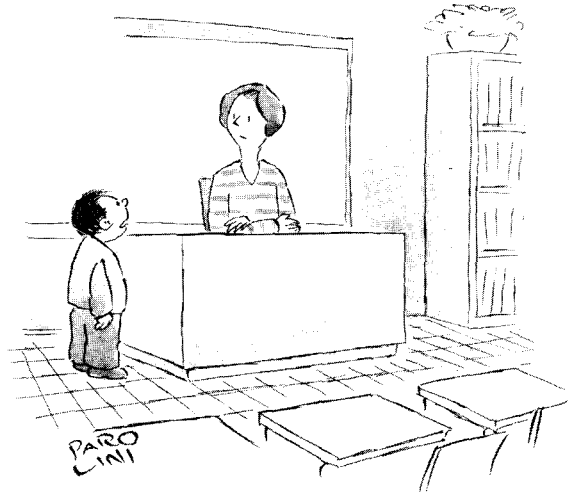


"The four food groups are breakfasts, lunches, dinners, and snacks."

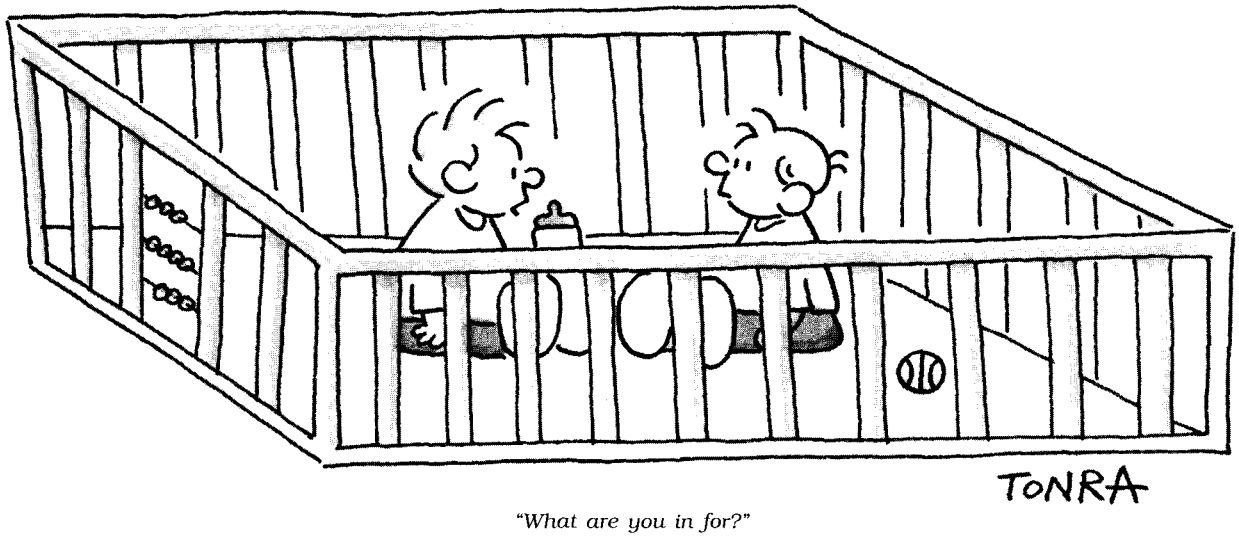


"Let me know when you get to the chapter on forgiving the unforgivable."

"What, no signing bonus?"



"Miss Peterson, keeping me after school all the time is just going to make a mean and bitter old man out of me."



"What are you in for?"

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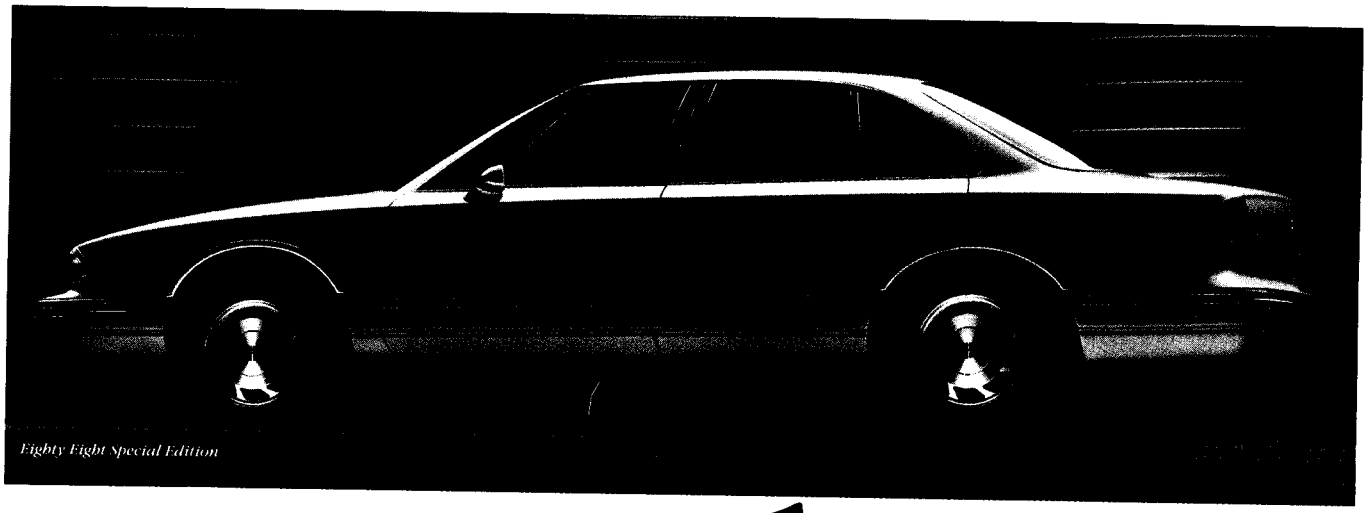

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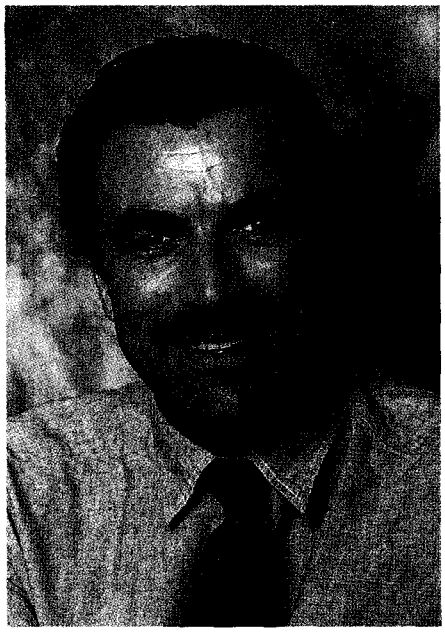
Post People

When he comes out of character, ***Tom Selleck*** is said to be anything *but* Thomas Magnum, the sex symbol who stole the hearts of millions of women around the world.

In his real life, this hotter-than-a-baked-potato actor of the '80s is the most private person you will likely never meet. Rather than sulk at his $2 million Thousand Oaks ranch after "Magnum, P.I." was canceled in 1988, Selleck and Jillie Mack, his wife of seven years, spent a year watching their daughter (Hannah, age five) grow up.



Today, Selleck spends much of his time, money, and effort as national spokesman for the Character Counts Coalition, an educational organization whose goal is to strengthen the moral fiber of the next generation. Of this new, serious role, Selleck says, "I don't want to be just a cardboard cutout." ▲

"What Tipper really is, is a lot of fun," says one Washington insider who has known her for years. The insider is referring, of course, to ***Mary Elizabeth Aitcheson Gore***, wife of Al Gore, our more serious vice president.

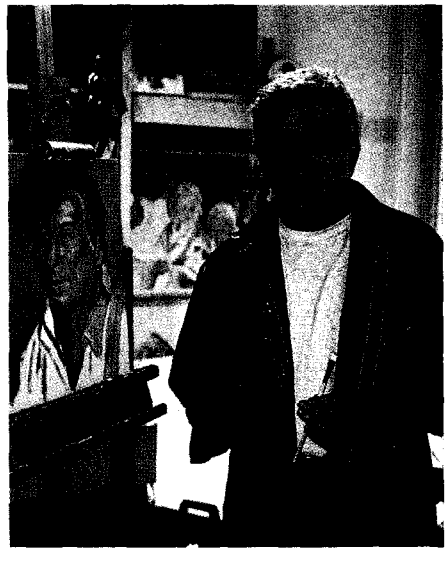
A former classmate backs up this picture of the rollerblading, motorcycle-riding second lady by adding, "Tipper is funny, down-to-earth, easy to talk to. You feel like you've known her forever."

However, no longer is it all practical jokes and candid-camera shots for Tipper Gore—code name Skylark. The shadows under her eyes are said to be

evidence of the public burdens she must now assume, the nurturing of four children, a workaholic husband, and assorted pets.

As advisor to the President's Health Care Task Force, Mrs. Gore has taken up the cause of mental health reform. "Critics think that it (mental health) is either something a person can will themselves out of, or it's a weakness," she says. "They don't believe it's a legitimate illness." But the determined second lady insists that it must be treated as any other disease and argues for increased benefits and universal coverage. ▲

You might think, considering his current popularity with the younger set, that ***Tony Bennett*** still has something to prove. He doesn't. This 67-year-old singer, whose heart remains in San Francisco regardless of where he is performing, has cut 59 albums, won four Grammys, and still performs 200 or more engagements a year.



Frank Sinatra once labeled Bennett "the best singer in the business." Bennett's idol, the late Bing Crosby, concurred: "He is the best singer I ever heard." Even MTV, the popular cable music channel, honored Bennett this past year with a spot on its wildly successful "Unplugged" concert series—something no other entertainer of his generation has achieved.

Being in the "creative zone" all the time, Bennett also paints, which he says helps him keep his sanity. "I really like my life right now," he says. "I happen to love what I do. It's a blessed condition." ▲

What do ***Cloris Leachman***, ***John Ritter***, ***Pam Dawber***, and ***Fred Savage*** (among others) have in common? It's called "Storytime," the acclaimed public-TV reading series based in Los Angeles that introduces young children to the exciting world of literature.

Today, everyone with a social conscience is complaining about the lack of quality TV programs for children. KCET (L.A.'s PBS affiliate) has produced this award-winning series in which celebrities read stories to children. The show premiered nationally in June on PBS; its producers hope that the 40 half-hour episodes will induce young viewers to make reading an essential part of their lives. ▲

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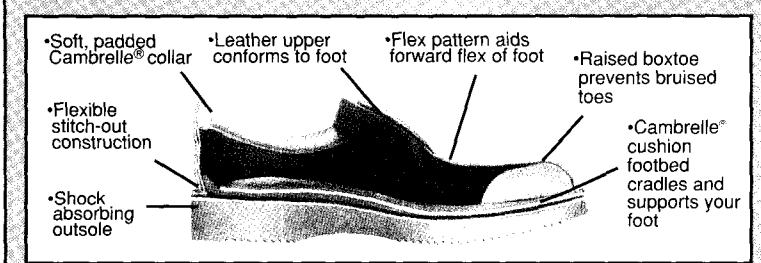
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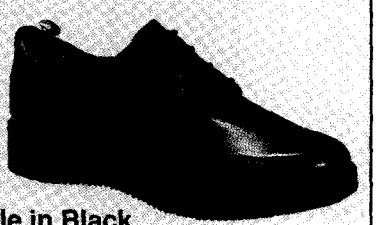

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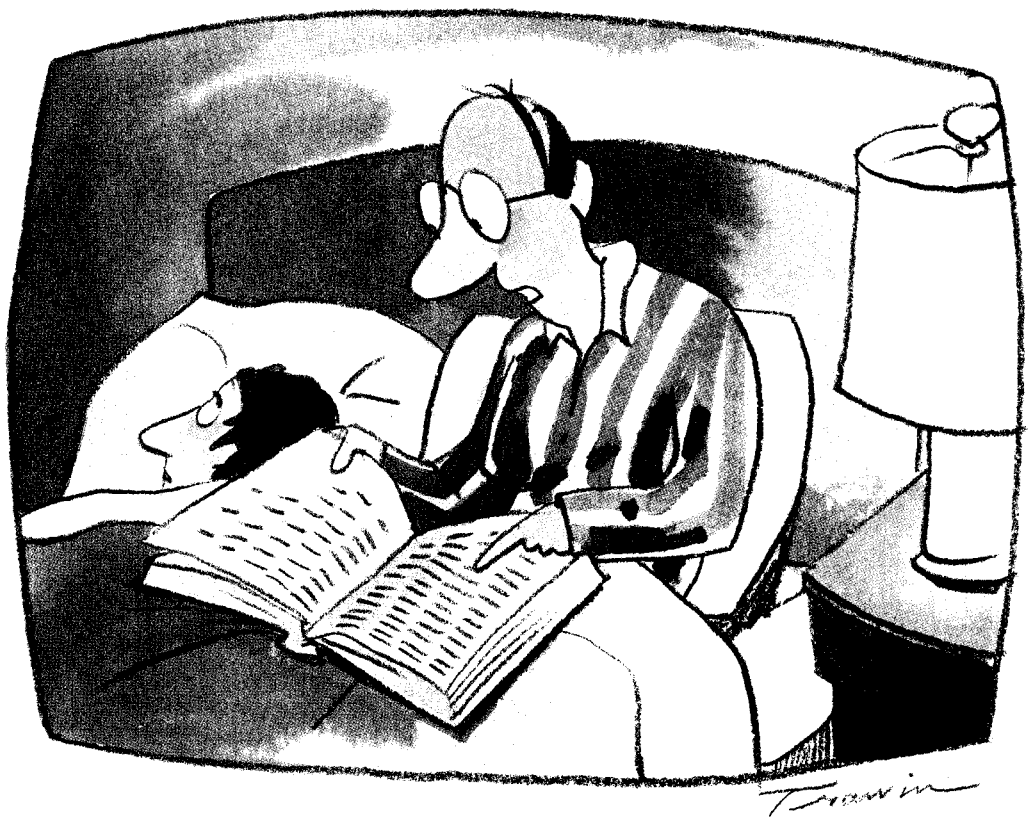

A RUDE AWAKENING

I had either waked her or wakened her.
I was eager to find out which she thought it was.

by Wen Smith

Illustrated by Don Trawin

One Monday morning, I was late getting out of bed. It wasn't that I had overslept—only that I wasn't sure whether I had woken up. It occurred to me that I may have *waked* up instead, and it didn't seem right to get out of bed until I knew which.

My wife would probably know which it was, but she was still asleep, and I didn't know whether to *wake* her or to *waken* her. It would be cruel to do the wrong thing.

When I turned over, she stirred and opened her eyes, so I knew I had either *waked* her or *wakened* her. I was eager to find out which she thought it was.

"Are you awake?" I asked.

"Yes," she said.

"Did I *wake* you, or did I *waken* you?"

"You awakened me."

I hadn't thought of that. The problem was taking on new dimensions.

"*Awakened*? Are you sure I didn't *wake* you?"

"Go back to sleep," she said. I tried, but I knew I wouldn't sleep again until I knew whether I had *waked* up or *woken* up and whether I had *waked*, *wakened*, or *awakened* her.

"When I woke you, did you *wake*, *waken*, *awake*, or *awaken*?"

"Most of the above," she said. "Now I would like to sleep."

"How can you do that when you don't know whether you've been waked up? Or should that be *awakened* up?"

"Nobody is ever *awakened* up," she said. "You just can't use *up* with *awake* or *awaken*."

"Then I must have *wakened* you."

"Whichever it was, it worked," she said.

"In my case," I said, "I think I *woke* up."

"Well, you certainly didn't *awake* up. Nobody does that."

"But maybe I *waked* up instead of *woke* up."

She turned toward me. "If you just did it yourself, you either *woke* up, or you *wakened*. *Awake* and *awaken* are things you do to somebody else."

I thought about that and decided she was probably right. I had *wakened*.

"Then, after I *wakened*, I *awaked* you."

"No, after you *woke*, you *awoke* me. Or *awakened* me."

She was getting into the challenge now, probably seeing that it was worth being awake for.

"Why not say, 'After I *awakened*, I *woke* you?' "

"I really wish you had woken up without awaking me," she said. She was not as far into it as I had thought.

"Go back to sleep," I said. "I'll get up and check this out."

She turned her back and pulled the covers over her head. I got out of bed, trying not to *wake*, *awaken*, or *awake* her again. Or *waken*.

It wasn't a problem I could solve without getting up, because I had stopped taking a dictionary to bed when William F. Buckley's show was switched to daytime. These nights, I don't sleep with reference works unless I'm in a foreign country where I need a phrase book. I can't count sheep comfortably unless I know what to call them.

Waking up, or awaking, is a daily trauma. First, you have to realize that you're awake. Then, you have to figure out where you are, a special problem if you do much traveling, or if you don't always sleep in the same room. Once or twice I have woken up, or awakened, in the kitchen after I had apparently gone down for a snack when I wasn't fully awake.

In my case, when I break out of sleep, I also have to think through the agenda for the day. First on the Monday list was to find out whether I had *waked* up or *woken* up.

For all the help the dictionary was, I could have stood in bed. All it says about *awake*, *awaken*, *wake*, and *waken* is: "All these forms are acceptable; all mean the same thing."

I tried to awaken my wife again to tell her the news, but she wouldn't budge. Lifting the dictionary so early in the day and before breakfast had worn me out. I went back to bed, sure of only one thing: It's a great life if you don't waken.

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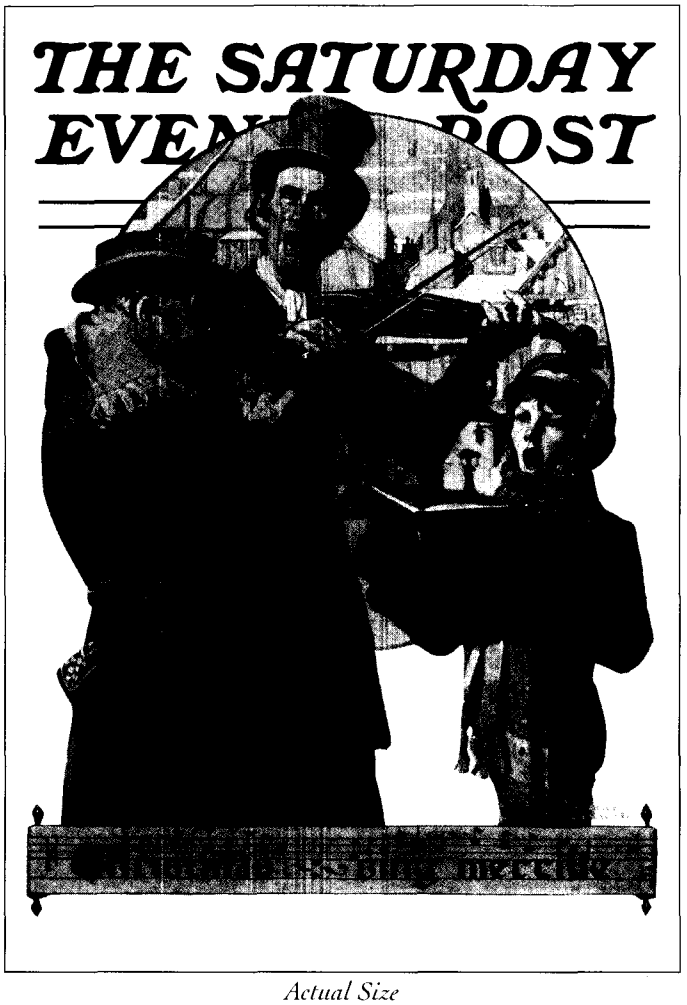

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FOOD

FOOD FOR WHAT AILS YOU

Calling Dr. Mom!—for home-cooked dishes that make a delicious remedy for a family member under the weather.

by Allen Simon

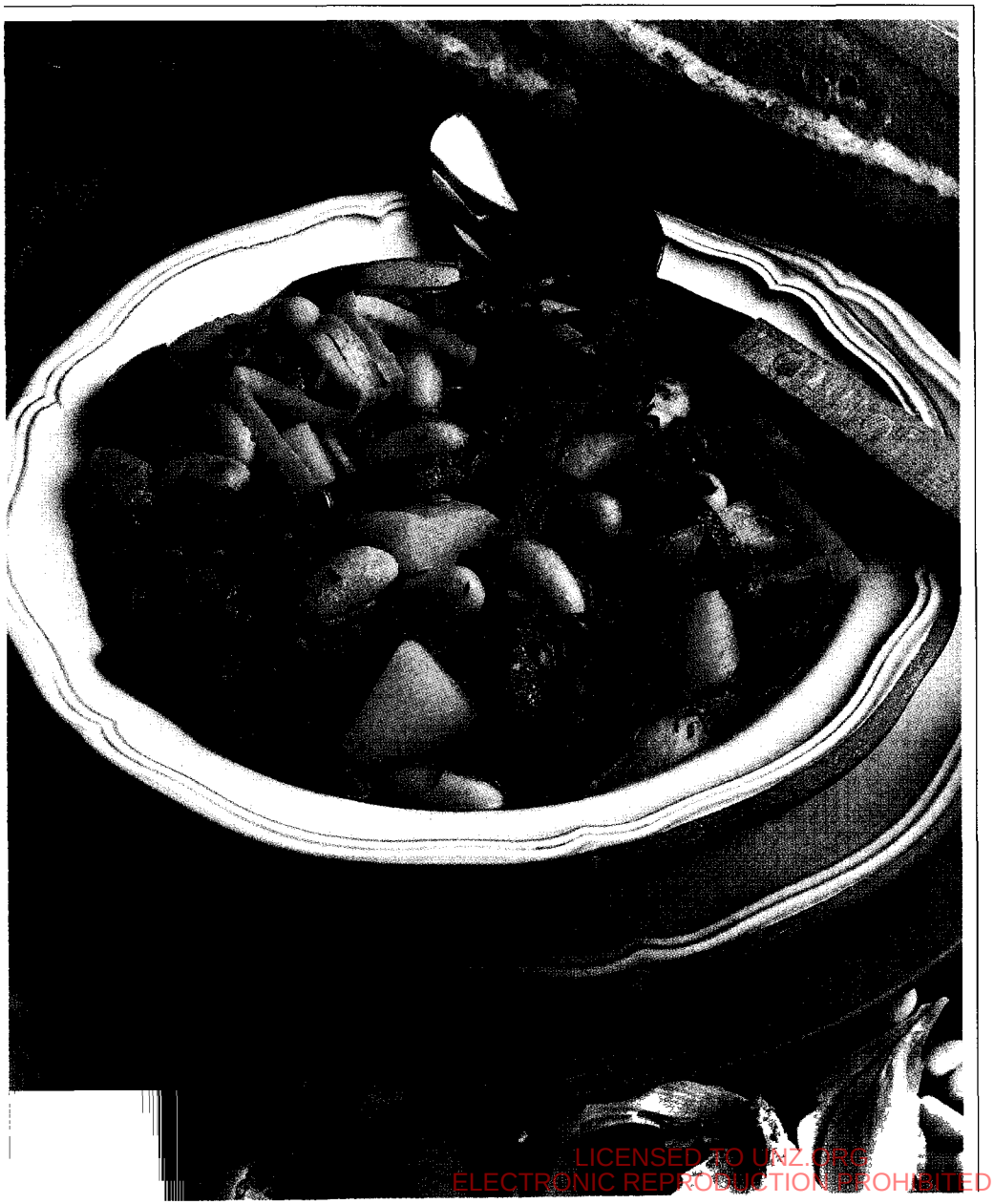
When one of their own falls ill, moms of Hungarian descent serve up a steaming bowl of "Hospital Soup." Whatever the ailment, this simple broth of flour, butter, caraway seeds, and water is sure to bring relief.

If the Chinese suffer from jet lag or insomnia, a soothing cup of chrysanthemum blossom tea seldom fails to help them relax and restore their circadian rhythms. Some Jewish mothers have only to hear the first sneeze or sniffle, and up comes a pot of chicken soup to put a quick kibosh on a developing cold.

Broths, teas, and certain other favorite foods have long been among the few pleasures that accompany illness. Warm, soothing, nutritious, and easy to digest, comfort foods sustain us when nothing else tastes good. Certainly, no commercial remedy has ever been as user-friendly as a steaming mug of chicken noodle soup.

When asked to name their favorite comfort foods, friends and relatives put soups and teas high on the list. Surprisingly, many also praised the virtues of macaroni and cheese.

Our test kitchens yielded the following comfort recipes to add to your kitchen apothecary. They include a tasty, low-fat macaroni and cheese and a more elaborate version of "Hospital Soup." You may not want to wait until someone gets sick to try them. These dishes are delicious anytime.



Fresh Tomato and Vegetable Soup

(Makes 4 servings)

4 medium (about 1¼ pounds) fresh tomatoes
2 tablespoons olive oil
2 cups yellow or red sweet bell pepper chunks
1 cup red onion chunks
1 tablespoon minced garlic
1 teaspoon fennel seeds, crushed
½ teaspoon thyme leaves, crushed
1 cup sliced zucchini
1 cup chicken broth
¼ cup dry white wine (if desired)
2 (4" x 1") pieces orange peel
1 can (19 oz.) white kidney (cannellini) beans, drained and rinsed
½ teaspoon salt

Use tomatoes held at room temperature until fully ripe. Core tomatoes; cut in halves, then cut in wedges (makes about 4 cups); set aside. In large skillet, heat oil until hot. Add peppers, onions, garlic, fennel seeds, and thyme; cook and stir 5 minutes. Add zucchini; cook and stir 5 minutes longer. Add broth, wine, and orange peel; bring to boil; reduce heat and simmer, covered, 5 minutes. Stir in beans, salt, and reserved tomatoes; simmer until tomatoes are tender, about 5 minutes. Serve with toasted French bread, if desired.

Per Serving (1½ cups):

Calories: 235	Carbohydrate: 30 gm
Cholesterol: 0 mg	Protein: 10 gm
Sodium: 769 mg	Fat: 8 gm

Diabetic exchange: 2 bread + 1 meat

◀ *Fresh Tomato and Vegetable Soup*

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Cream of Mushroom Soup
(Makes 4 servings)

3 teaspoons or cubes low-sodium chicken bouillon
4 cups boiling water
3 tablespoons flour
¼ teaspoon dry mustard
⅛ teaspoon cayenne pepper
⅛ teaspoon soda
2 tablespoons low-fat margarine
2 green onions with tops, chopped
¾ pound mushrooms, sliced or chopped
1 cup condensed skim milk
⅓ cup sherry (if desired)

Combine low-sodium bouillon and water and set aside. Combine flour with dry mustard, pepper, and soda. Melt margarine and combine with flour mixture until creamed.

In 3-quart pan, combine creamed mixture, bouillon, onions, and mushrooms. Mix until smooth. Bring to gentle boil, reduce heat, and simmer 30-40 minutes. Add milk while stirring mixture. Add sherry if desired and stir in well.

Per Serving (1¼ cups):
Calories: 178 Carbohydrate: 19.0 gm
Cholesterol: 5 mg Protein: 7.8 gm
Sodium: 198 mg Fat: 5.4 gm
Diabetic exchange: ½ skim milk + 1 bread + 1 vegetable + 1 fat

Easy Chicken Noodle Soup
(Makes 6 servings)

1 leg, 1 thigh, 1 breast skinned and all fat removed, or about 4 oz. diced cooked chicken
2 quarts water
4 teaspoons low-salt chicken broth granules
½ cup onion, chopped
¼ cup celery, chopped
1 tablespoon dried parsley
½ teaspoon poultry seasoning
½ teaspoon pepper
1 cup dried no-cholesterol noodles

Combine all ingredients except noodles in soup pot. Bring to boil on medium heat, then simmer about 45 minutes. Remove bone from chicken. Dice meat and return to soup with noodles. Cook 15-20 minutes more until noodles are tender.

Per Serving (1¼ cups):
Calories: 108 Carbohydrate: 15.4 gm
Cholesterol: 19 mg Protein: 8.4 gm
Sodium: 29 mg Fat: 1.3 gm
Diabetic exchange: 1 bread + ½ lean meat

Homemade Vegetable Soup
(Makes 8 servings)

3 cups low-sodium beef broth
2 cups low-salt V-8
2 cups low-sodium packed or fresh tomatoes, chopped
1 medium onion, chopped
3 carrots, peeled and sliced into ¼" slices
2 stalks celery, chopped
¼ cup chopped green pepper
2 medium potatoes
2 cups fresh or low-salt packed green beans, cut diagonally
1 teaspoon black pepper
2 teaspoons dried parsley flakes

Combine broth, V-8, tomatoes, onion, carrots, celery, green pepper, and potatoes. Bring to boil and simmer on medium heat 1 hour or more until vegetables are tender. Add beans and seasonings and simmer 15-30 minutes until beans are tender. Serve.

Per Serving (1¼ cups):
Calories: 117 Carbohydrate: 24.2 gm
Cholesterol: 1 mg Protein: 3.4 gm
Sodium: 50 mg Fat: 0.6 gm
Diabetic exchange: 1 bread + 1½ vegetables

Caraway-Potato Soup
(Makes 5 servings)

2 tablespoons low-fat margarine
1 medium onion, chopped
¼ cup celery, chopped
3 medium potatoes, peeled and diced
1 quart boiling water
1 teaspoon caraway seed
1 tablespoon flour

Melt 1 tablespoon margarine in skillet and sauté onion and celery until onion is tender and transparent. Transfer to larger stockpot. Add potatoes, water, and caraway seed. Bring to boil, lower heat to medium, and simmer approximately 1 hour. Add more water if needed.

Brown flour in skillet; add margarine and small portion of potato soup. Mix until blended and thickened. Add to remaining potato soup and mix until well blended.

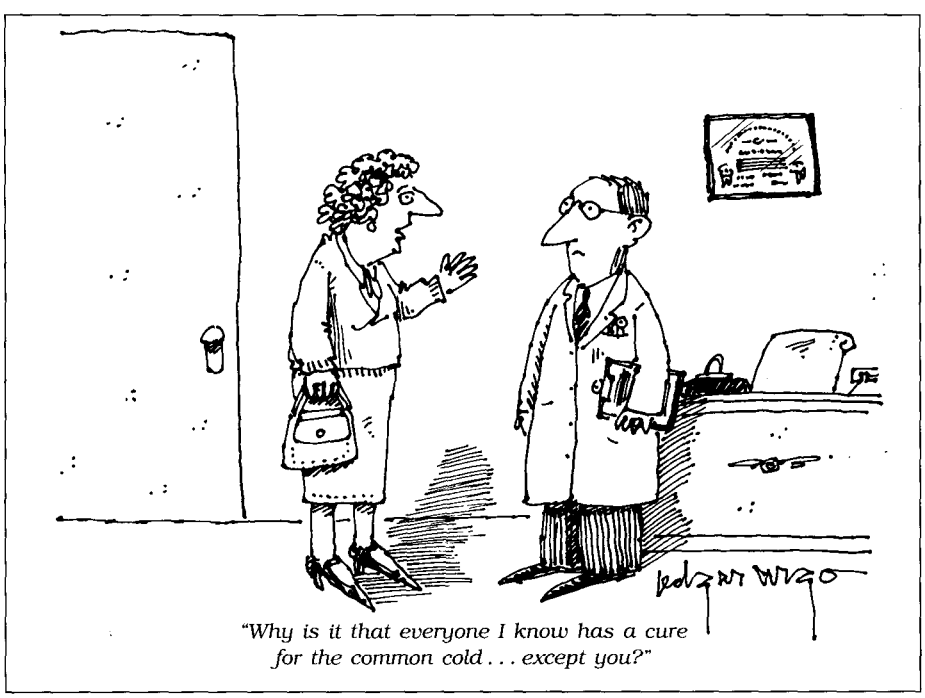
Per serving (¾ cup):
Calories: 138 Carbohydrate: 24.9 gm
Cholesterol: 0 mg Protein: 3.2 gm
Sodium: 58 mg Fat: 2.8 gm
Diabetic exchange: 1½ bread + ½ fat

Homemade Potato Soup
(Makes 4 servings)

4 small raw potatoes
2 cups low-salt chicken broth
½ cup onion
¼ cup green pepper
¼ teaspoon black or white pepper (if desired)
½ teaspoon butter flavor
1 tablespoon flour
¼ cup skim milk
1 cup cooked green beans or peas (if desired)

Peel potatoes and cut into about 1" cubes. Simmer potatoes, chicken broth, onion, peppers, and butter flavor until potatoes are tender. Take out ½ cup to 1 cup. Blenderize. Add flour mixed in ¼ cup cold skim milk to this portion. Return to rest of mixture. Add green beans and simmer 10 minutes. Serve.

Per Serving (1 cup):
Calories: 141 Carbohydrate: 29.1 gm
Cholesterol: 2 mg Protein: 4.8 gm
Sodium: 51 mg Fat: 0.5 gm
Diabetic exchange: 2 bread



"Why is it that everyone I know has a cure for the common cold . . . except you?"

continued on page 33

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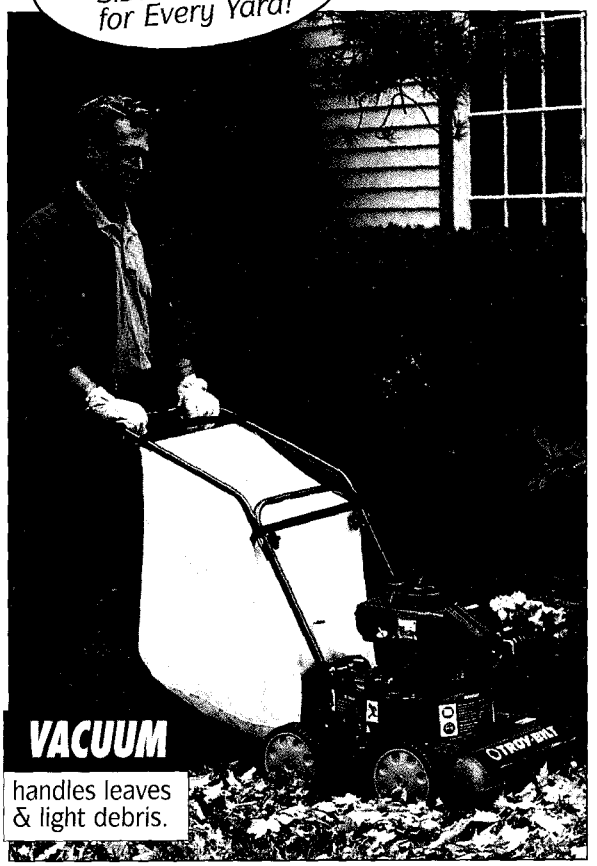

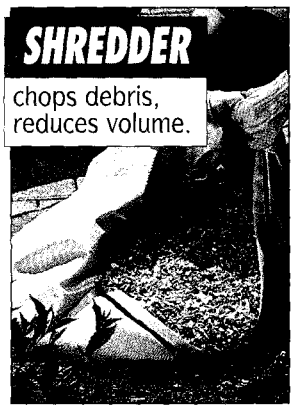

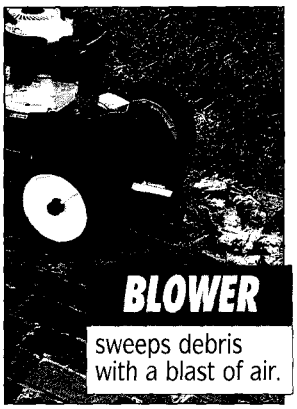

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Physical activity may help reduce risks, relieve symptoms.

by Carol Krucoff

The Big M is big news. As female baby boomers approach menopause, the once-taboo topic has become the focus of best-selling books, TV talk shows, and support groups.

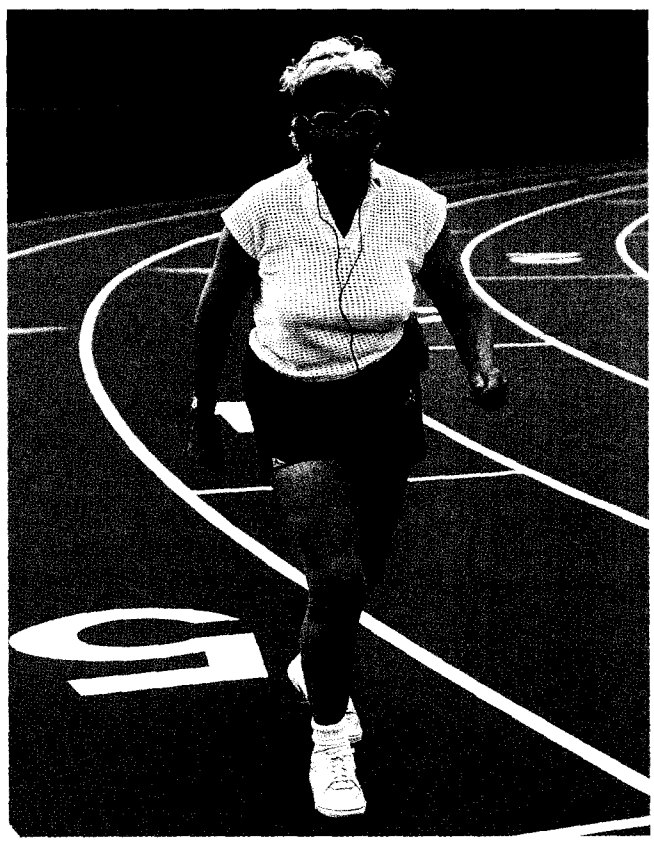
While many issues surrounding menopause are unclear or controversial, health professionals agree that physical activity is critical during and after the change of life to help women maintain their health and independence. Regular exercise may help reduce the risk of numerous health problems women face when estrogen levels drop, including elevated cholesterol, osteoporosis, and cardiovascular disease.

Scattered studies and anecdotal evidence suggest that exercise also might help relieve common symptoms, such as hot flashes, depression, anxiety, and sleeplessness.

"Older women need regular exercise most," says gynecologist Mona Shangold, director of the Sports Gynecology and Women's Life Cycle Center at Hahnemann University in Philadelphia. "Although many women over age 50 believe exercise is dangerous for them, it is actually dangerous for them not to exercise."

Exercise can, in some ways, help compensate for the body's loss of estrogen, says Dr. Wulf Utian, director of obstetrics and gynecology at University Hospitals of Cleveland and founder and president of the North American Menopause Society. "As estrogen levels go down, total cholesterol levels go up," says Dr. Utian, who notes that "the higher the cholesterol, the higher the risk of coronary heart disease." Regular aerobic exercise elevates the level of HDL "good" cholesterol and helps lower body fat, which is associated with lower LDL "bad" cholesterol.

"Also, with estrogen deficiency, there seems to be a reduction in blood flow to every part of the body," Dr. Utian says. "Regular exercise will increase the strength and function of the whole body and its ability to generate circulation." Dr. Utian prescribes exercise as part of the program outlined in his book, *Managing Your Menopause*.



Don't let menopause stop you. Get busy, health professionals advise. Active women are less prone to menopausal symptoms such as hot flashes, anxiety, depression, and sleeplessness.

"It is my belief that women who are physically active are better able to deal with symptoms associated with menopause," he says. "We know that hormones change mood and that estrogen has a mood-elevating effect." Loss of estrogen may explain why some menopausal women feel depressed, says Dr. Utian, who notes that regular aerobic exercise can help relieve depression.

"Recent studies directed specifically toward menopausal women have shown that vigorous exercise reduces muscle tension and decreases anxiety," he says.

"Some researchers think that women who exercise regularly do not experience as many or as severe hot flashes as [sedentary] women," writes Arizona State University exercise science professor Christine L. Wells in *Women, Sport, and Performance*. Her recent study of older female athletes concluded that while "age does affect the body's response to exercise, menopause in itself does not."

Exercise also may help offset age-related bone loss and the accompanying risk of osteoporosis, notes Sheryl Sherman, director of the osteoporosis program at the National Institute on Aging. While exercise alone won't prevent bone loss resulting from reduced estrogen levels, Sherman says, exercise combined with dietary calcium may help offset this loss. And exercise combined with estrogen replacement may stabilize or slightly increase bone density. "Later in life," she adds, "exercise may improve musculoskeletal strength and reduce the likelihood of falls."

Menopause may also be a risk factor for weight gain, notes Sherman, whose study of ovarian hormone deficiency in rats showed that rats without ovaries gained three times as much weight over 16 weeks as rats with intact ovaries who ate the same amount. "One of the tendencies of aging is to get fatter," notes Gail Dalsky, assistant professor of medicine at the University of Connecticut Health Center. "Regular exercise can help control body weight and body fat."

For many women, "menopause is an important time to look ahead at the next 25 to 30 years and decide what kind of person you're going to be," says Barbara Drinkwater, a research physiologist at the Pacific Medical Center in Seattle. "Unless you look forward to sitting in a rocking chair in a nursing home, there's no better time to start moving."

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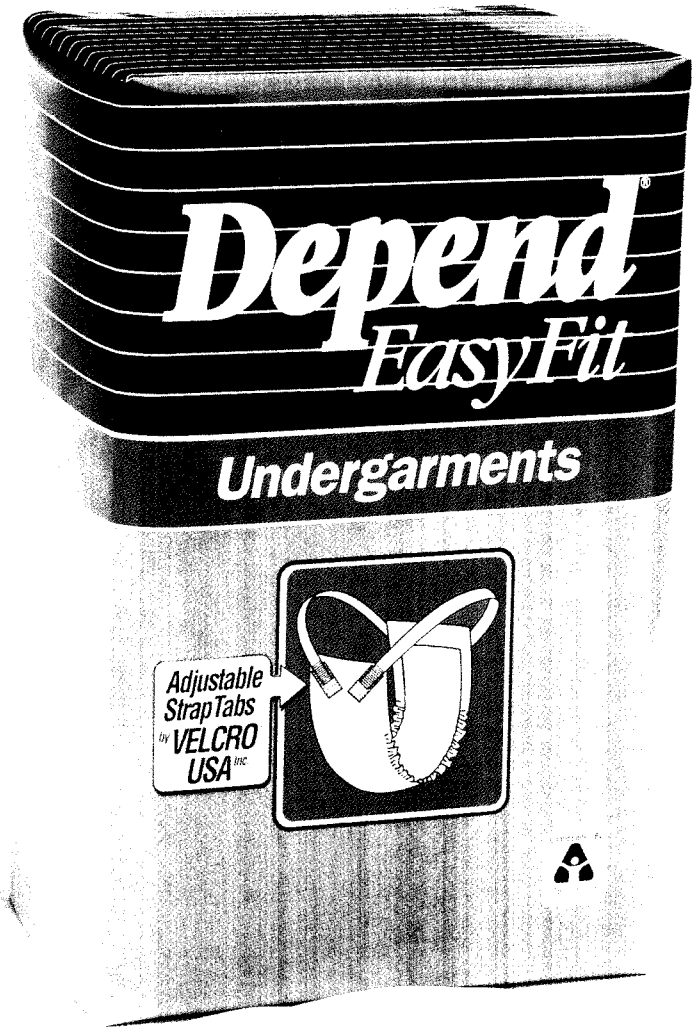

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"POLITICAL ECONOMY"

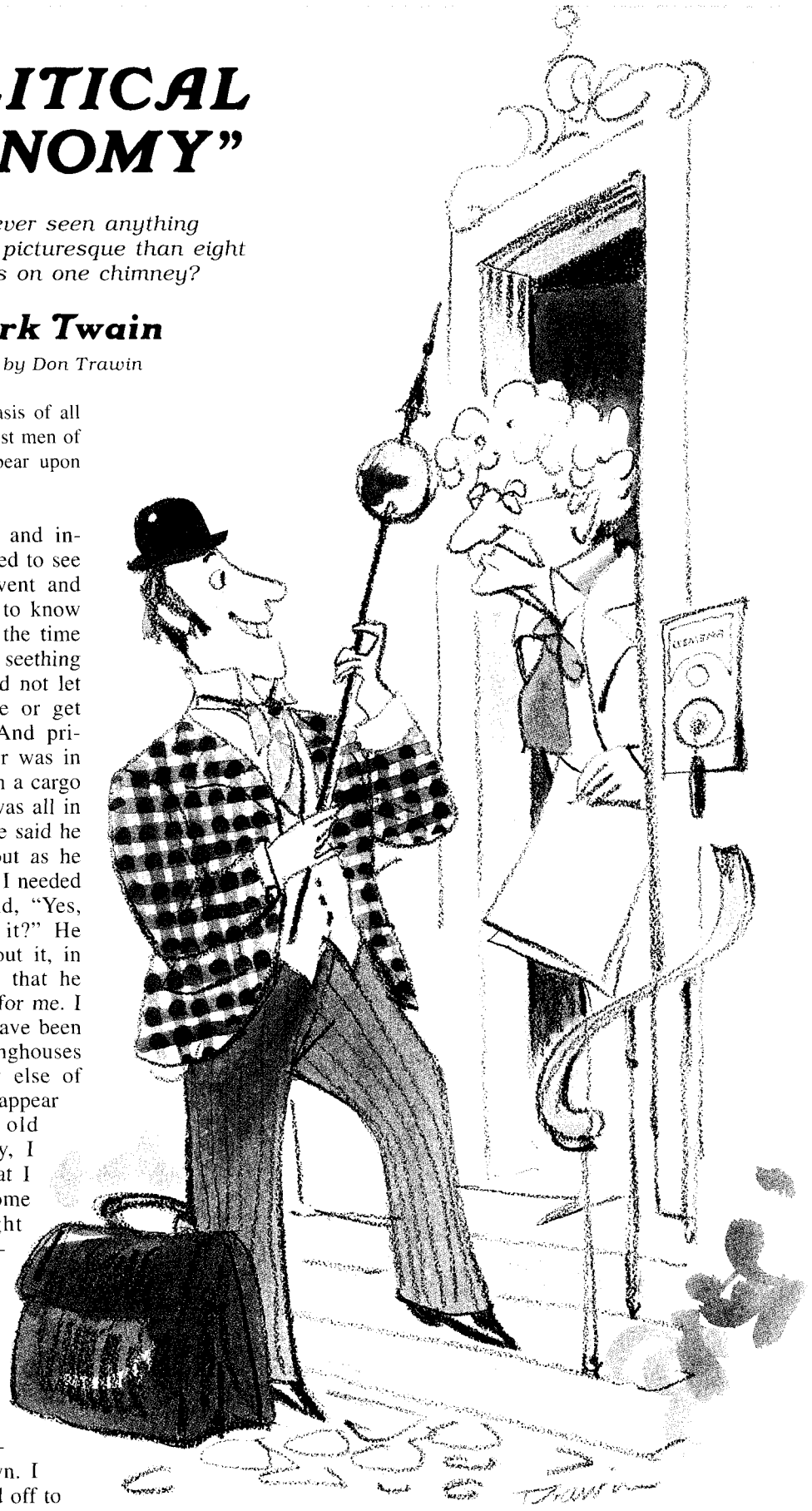
Have you ever seen anything more deliriously picturesque than eight lightning rods on one chimney?

by Mark Twain

Illustrated by Don Trawin

Political economy is the basis of all good government. The wisest men of all ages have brought to bear upon this subject the—

[Here I was interrupted and informed that a stranger wished to see me down at the door. I went and confronted him, and asked to know his business, struggling all the time to keep a tight rein on my seething political-economy ideas, and not let them break away from me or get tangled in their harness. And privately I wished the stranger was in the bottom of the canal with a cargo of wheat on top of him. I was all in a fever, but he was cool. He said he was sorry to disturb me, but as he was passing he noticed that I needed some lightning rods. I said, "Yes, yes—go on—what about it?" He said there was nothing about it, in particular—nothing except that he would like to put them up for me. I am new to housekeeping; have been used to hotels and boardinghouses all my life. Like anybody else of similar experience, I try to appear (to strangers) to be an old housekeeper; consequently, I said in an offhand way that I had been intending for some time to have six or eight lightning rods put up, but—The stranger started, and looked inquiringly at me, but I was serene. I thought that if I chanced to make any mistakes, he would not catch me by my countenance. He said he would rather have my custom than any man's in town. I said, "All right," and started off to



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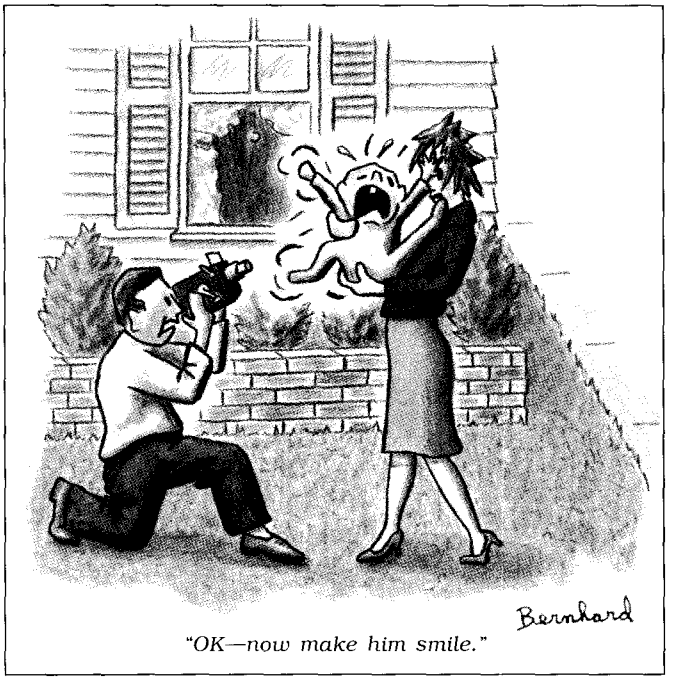
wrestle with my great subject again, when he called me back and said it would be necessary to know exactly how many "points" I wanted to put up, what parts of the house I wanted them on, and what quality of rod I preferred. It was close quarters for a man not used to the exigencies of housekeeping; but I went through creditably, and he probably never suspected that I was a novice. I told him to put up eight "points," and put them all on the roof, and use the best quality of rod. He said he could furnish the "plain" article at 20 cents a foot; "coppered," 25 cents; "zinc-plated spiral-twist," at 30 cents, that would stop a streak of lightning any time, no matter where it was bound, and "render its errand harmless and its further press apocryphal." I said apocryphal was no slouch of a word, emanating from the source it did, but, philology aside, I liked the spiral-twist and would take that brand. Then he said he *could* make 250 feet answer; but to do it right, and make the best job in town of it, and attract the admiration of the just and the unjust alike, and compel all parties to say they never saw a more symmetrical and hypothetical display of lightning rods since they were born, he supposed he really couldn't get along without 400, though he was not vindictive, and trusted he was willing to try. I said, go ahead and use 400, and make any kind of a job he pleased out of it, but let me get back to my work. So I got rid of him at last; and now, after half an hour spent in getting my train of political-economy thoughts coupled together again, I am ready to go on once more.]

> richest treasures of their genius, their experience of life, and their learning. The great lights of commercial jurisprudence, international confraternity, and biological deviation, of all ages, all civilizations, and all nationalities, from Zoroaster down to Horace Greeley, have—

[Here I was interrupted again, and required to go down and confer further with that lightning-rod man. I hurried off, boiling and surging with prodigious thoughts wombed in words of such majesty that each one of them was in itself a straggling procession of syllables that might be 15 minutes passing a given point, and once more I confronted him—he so calm and sweet, I so hot and frenzied. He was standing in the contemplative attitude of the Colossus of Rhodes, with one foot on my infant tuberose and the other among my pansies, his hands on his hips, his hat brim tilted forward, one eye shut and the other gazing critically and admiringly in the direction of my principal chimney. He said now there was a state of things to make a man glad to be alive and added, "I leave it to *you* if you ever saw anything more deliriously picturesque than eight lightning rods on one chimney?" I said I had no present recollection of anything that transcended it. He said that in his opinion, nothing on earth but Niagara Falls was superior to it in the way of natural scenery. All that was needed now, he verily believed, to make my house a perfect balm to the eye, was to kind of touch up the other chimneys a little, and thus "add to the generous *coup d'oeil* a soothing uniformity of achievement which would allay the excitement naturally consequent upon the *coup d'etat*." I asked him if he learned to talk out of a book, and if I could borrow it anywhere? He smiled pleasantly, and said that his manner of speaking was not taught in books, and that nothing but familiarity with lightning could enable a man to handle his conversational style with impunity. He then figured up an estimate and said that about eight more rods scattered about my roof would about fix me right, and he guessed 500 feet of stuff would do it and added that the first eight had got a little the start of him, so to speak, and used up a mere trifle of material more than he had calculated on—a hundred feet or along there. I said I was in a dreadful hurry, and I wished we could get this business permanently mapped out so that I could go on with my work. He said, "I could have put up those eight rods and marched off about my business—some men *would* have done it. But no; I said to myself, this man is a stranger to me, and I will die before I'll wrong him; there ain't lightning rods enough on that house, and for one, I'll never stir out of my tracks till I've done as I would be done by, and told him so. Stranger, my duty is accomplished; if the recalcitrant and dephlogistic messenger of heaven strikes you—" "There, now, there," I said, "put on the other eight—add 500 feet of spiral-twist—do anything and everything you want to do, but calm your sufferings and try to keep your feelings where you can reach them with the dictionary. Meanwhile, if we understand each other now, I will go to work again."



"OK—now make him smile."

I think I have been sitting here a full hour this time, trying to get back to where I was when my train of thought was broken up by the last interruption, but I believe I have accomplished it at last and may venture to proceed again.]

> wrestled with this great subject, and the greatest among them have found it a worthy adversary, and one that always comes up fresh and smiling after every throw. The great Confucius said that he would rather be a profound political economist than chief of police. Cicero frequently said that political economy was the grandest consummation that the human mind was capable of consuming; and even our own Greeley had said vaguely but forcibly that "*Political*—

[Here the lightning-rod man sent up another call for me. I went down in a state of mind bordering on impatience. He said he would rather have died

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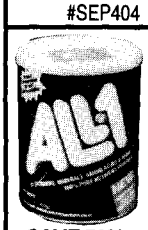

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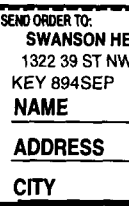

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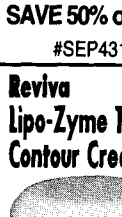

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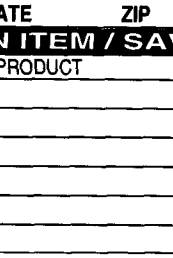

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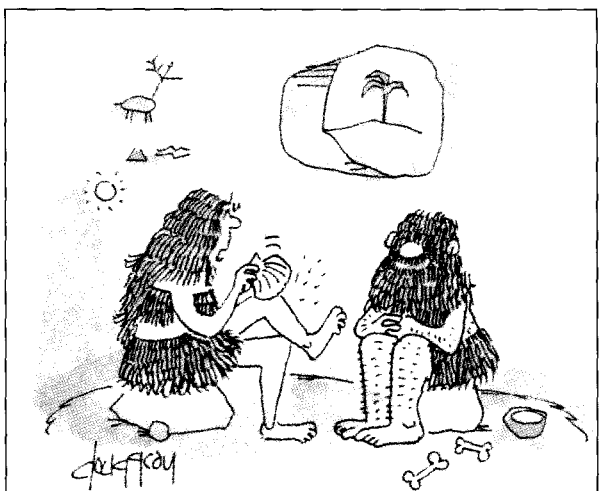
than interrupt me, but when he was employed to do a job, and that job was expected to be done in a clean, workmanlike manner, and when it was finished and fatigue urged him to seek the rest and recreation he stood so much in need of, and he was about to do it, but looked up and saw at a glance that all the calculations had been a little out, and if a thunderstorm were to come up and that house, which he felt a personal interest in, stood there with nothing on earth to protect it but 16 lightning rods—"Let us have peace!" I shrieked. "Put up 150! Put some on the kitchen! Put a dozen on the barn! Put a couple on the cow!—Put one on the cook!—Scatter them all over the persecuted place till it looks like a zinc-plated, spiral-twisted, silver-mounted canebrake! Move! Use up all the material you can get your hands on, and when you run out of lightning rods, put up ramrods, cam-rods, stair-rods, piston-rods—anything that will pander to your dismal appetite for artificial scenery and bring respite to my raging brain and healing to my lacerated soul!" Wholly unmoved—further than to smile sweetly—this iron being simply turned back his wrist-bands daintily, and said he would now proceed to hump himself. Well, all that was nearly three hours ago. It is questionable whether I am calm enough yet to write on the noble theme of political economy, but I cannot resist the desire to try, for it is the one subject that is nearest to my heart and dearest to my brain of all this world's philosophy.]

—"*economy is heaven's best boon to man.*" When the loose but gifted Byron lay in his Venetian exile, he observed that, if it could be granted him to go back and live his misspent life over again, he would give his lucid and unintoxicated intervals to the composition, not of frivolous rhymes, but of essays upon political economy. Washington loved this exquisite science; such names as Baker, Beckwith, Judson, Smith, are imperishably linked with it; and even imperial Homer, in the ninth book of the Iliad, has said:

Fiat justitia, ruat coelum,
Post mortem unum, ante bellum,
Hic jacet hoc, ex-parte res,
Politicum e-conomico est.

The grandeur of these conceptions of the old poet, together with the felicity of the wording which clothes them and the sublimity of the imagery whereby they are illustrated, have singled out that stanza and made it more celebrated than any that ever—

["Now, not a word out of you—not a single word. Just state your bill and relapse into impenetrable silence for ever and ever on these premises. Nine hundred dollars? Is that all? This check for the amount will be honored at any respectable bank in America. What is that multitude of people gathered in the street for? How?—'Looking at the lightning rods!' Bless my



"I'm just shaving my legs once. Don't expect it to become a habit."

life, did they never see any lightning rods before? Never saw 'such a stack of them on one establishment,' did I understand you to say? I will step down and critically observe this popular ebullition of ignorance."]

THREE DAYS LATER.—We are all about worn out. For four-and-twenty hours, our bristling premises were the talk and wonder of the town. The theaters languished, for their happiest scenic inventions were tame and commonplace compared with my lightning rods. Our street was blocked night and day with spectators, and among them were many who came from the country to see. It was a blessed relief on the second day when a thunderstorm came up and the lightning began to "go for" my house, as the historian Josephus quaintly phrases it. It cleared the galleries, so to speak. In five minutes, there was not a spectator within half a mile of my place, but all the high houses about that distance away were full, windows, roof, and all. And well they might be, for all the falling stars and Fourth-of-July fireworks of a generation, put together and rained down simultaneously out of heaven in one brilliant shower upon one helpless roof, would not have any advantage of the pyrotechnic display that was making my house so magnificently conspicuous in the general gloom of the storm. By actual count, the lightning struck at my establishment 764 times in 40 minutes, but tripped on one of those faithful rods every time and slid down the spiral-twist and shot into the earth before it probably had time to be surprised at the way the thing was done. And through all that bombardment, only one patch of slates was ripped up, and that was because, for a single instant, the rods in the vicinity were transporting all the lightning they could possibly accommodate. Well, nothing was ever seen like it since the world began. For one whole day and night, not a member of my family stuck his head out of the window, but he got the hair snatched off it as smooth as a billiard-ball; and, if the reader will believe me, not one of us ever dreamt of stirring abroad. But at last the awful siege came to an end—because there was absolutely no more electricity left in the clouds above us within grappling distance of my insatiable rods. Then I sallied forth, and gathered daring workmen together, and not a bite or a nap did we take till the premises were utterly stripped of all their terrific armament except just three rods on the house, one on the kitchen, and one on the barn—and, behold, these remain there even unto this day. And then, and not till then, the people ventured to use our street again. I will remark here, in passing, that during that fearful time I did not continue my essay upon political economy. I am not even yet settled enough in nerve and brain to resume it.

TO WHOM IT MAY CONCERN—Parties having need of 3,211 feet of best-quality, zinc-plated, spiral-twist lightning-rod stuff, and 1,631 silver-tipped points, all in tolerable repair (and, although much worn by use, still equal to any ordinary emergency), can hear of a bargain by addressing the publisher.

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continued from page 24

Macaroni & Cheese
(Makes 4 servings)

1 cup dried macaroni
3-4 tablespoons flour
1 cup skim milk
1 teaspoon onion powder
¼ teaspoon white pepper
2 teaspoons butter flavoring
2 cups shredded no-fat cheddar cheese (about 8 oz.)

Cook macaroni in unsalted water until tender, following package directions. While macaroni is cooking, combine flour, milk, onion powder, pepper, and butter flavoring. Cook until thickened. Fold in 1 cup cheese, stirring only one way to prevent curdling, until melted. Do not overcook. Drain macaroni. Fold gently into cheese sauce. Put into casserole sprayed with noncaloric vegetable spray. Top with other cup cheese. Heat 20 minutes. Serve.

Per Serving (½-⅔ cups):
Calories: 210 Carbohydrate: 28.6 gm
Cholesterol: 10 mg Protein: 22.2 gm
Sodium: 447 mg Fat: 0.7 gm
Diabetic exchange: 1½ bread + ½ cup skim milk + 1 very lean meat

Citrus Tea

1 tea bag
6 oz. boiling water
1 teaspoon frozen orange juice concentrate

Steep tea bag in 6 oz. boiling water 2-3 minutes. Remove tea bag and add 1 teaspoon orange juice concentrate. Serve.

Note: Do not add concentrate before steeping tea, or some vitamin C will be lost.

Per Serving:
Calories: 10 Carbohydrate: 2.2 gm
Cholesterol: 0 mg Protein: 0.1 gm
Sodium: trace Fat: trace
Diabetic exchange: Free list

Prune "Tea"

1½ oz. prune juice
1 teaspoon lemon juice
5 oz. boiling water

Combine prune juice and lemon juice in cup. Add boiling water and let steep 1-2 minutes. Serve.

Per Serving:
Calories: 37 Carbohydrate: 8.7 gm
Cholesterol: 0 mg Protein: 0.3 gm
Sodium: 5 mg Fat: 0 gm
Diabetic exchange: ½ fruit

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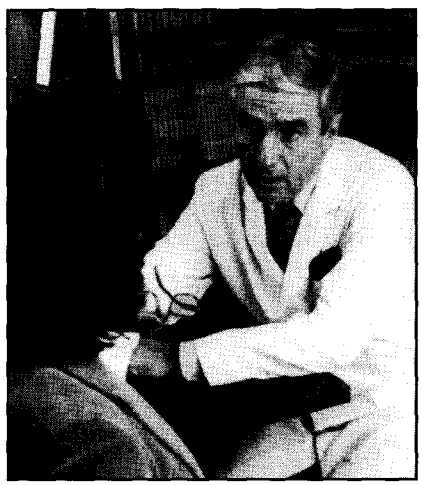
"For years I sympathized with patients who were forced to live with the pain and embarrassment of Psoriasis."

Sufferers who have tried creams, medicines and special treatments and worse yet, those who tried to find relief from doctors and have found no cure, can finally discover the help they need.



No More Itching. No More Scales...

As one sufferer related, ***"I couldn't go swimming or wear dresses because I was so ashamed and embarrassed. I went to doctors and dermatologists, used creams, took shots, slept in plastic suits. But there was no change. Then I started your program and early in October I was clear."***

Another typical sufferer had been told there was no cure for Psoriasis. ***"I thought I'd go crazy. I was skeptical but in one month, scales are virtually all gone, the itching has disappeared and I have more pep."***

Here's THE ANSWER.

My revolutionary approach involves the relatively new field of Bioenergetics. This has to do with the energy system of the body and how health and disease affects it. ***Conventional treatment for Psoriasis focuses on the effects of the disease. My plan can end Psoriasis because it treats the cause.***

Send For FREE INFORMATION!

Send today for information on how to end Psoriasis once and for all. If you suffer, or know someone who does, I encourage you to write for a **FREE** packet of information about this remarkable discovery including details of the risk free money back guarantee. Don't delay – mail the coupon below today!

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POST SCRIPTS

Sure to Catch On

Some things are contagious,
Like chicken pox and mumps—
Things that give you rashes
And ugly, itchy bumps.
But things that are contagious
Yet worth the taking in—
A happy mood, a hearty laugh,
A big, infectious grin!

—Bette Killion

Fall Foliage

My neighbor shares the bounty
Of his spreading apple tree.
The fruit falls on his side of the fence
And the leaves are left for me.

—Kathryn McGaughey

Welcome to the Real World

Math, science, social studies, so much work to do.
My head is filling up with facts,
My brain is turning to goo.
Just once, I'd like to come to school and spend the day relaxing.
Enjoy a good book, play some games,
Doing things not too taxing.
Work all day, no time to play. Did the governor call with my pardon?
Maybe next year will be much better,
If I can get through kindergarten.

—Dennis J. Wilson

Top of the List

The one thing procrastinators don't put off for tomorrow is goofing off today.

—Gil Stern

Think, While You Can

My kitchen table is the place,
I do my thinking—elbows braced
And chin in hand—I contemplate
The world's great leaders, heads of states,
The meaning of life, global strife,
Problems that arise between man and wife,
Factors that determine saint or sinner,
What makes a firefly's belly glimmer,
But more importantly—
What's for dinner?

—Elaine Burcham

Sized Up

Define fat?
Why, it
Is past tense
Of fit.

—John Nixon, Jr.

"Golden Oldie" Me

"Granddad, you're fantastic!"
I overheard a youngster say.
"You must be getting very old
if you remember JFK!"

Well, I'm going home to take a nap.
I'm glad I brought my car.
Surely, I'm too old to walk—
Because I remember FDR!

—Lois V. Denson

A Real Eye-Opener

I seldom notice cobwebs,
Dust and other things
In need of my attention
Until the doorbell rings.

—Virginia Isaacs

Middle-Aged Wisdom

I think middle age is the time
You wish you'd never hid
And refused those naps
When you were a kid.

—Olga McCoy

The Odds Are Against It

With track and off-track betting, casino and riverboat gambling, plus state lotteries, is this the land of opportunity or the land of chance?

—Gil Stern

Best Not to Pass It On

Never spread unfounded rumors
Even hints can hurt—
You make a mountain from a molehill
When you add a little dirt.

—Bessie James Megee

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Fed Up and Out

My appetite's soared out of sight;
I've gotten downright gluttony.
And now my clothes are showing strain:
My coat's no longer buttony.

—*Addie Adam*

Silent Flight

Some folks know how to keep their money;
Mine has a habit of straying.
Some folks say that money talks—
Mine just goes without saying.

—*Agnes W. Thomas*

Best at Getting Attention

It truly is amazing that
Although she cannot speak,
My baby manages, sans words,
Such chaos, still, to wreak.

For she has learned it very young,
Though lacking some in poise;
That those who get attention are
The ones who make the noise!

—*Kathleen Y. Bergeron*

The Life of Spice

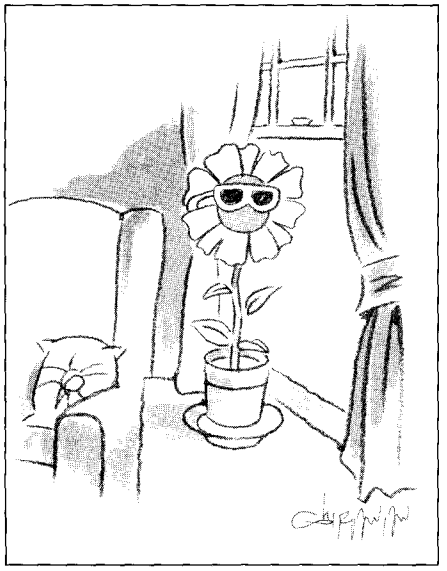
The foods we're fond of,
To our sorrow,
Will probably be
Suspect tomorrow.

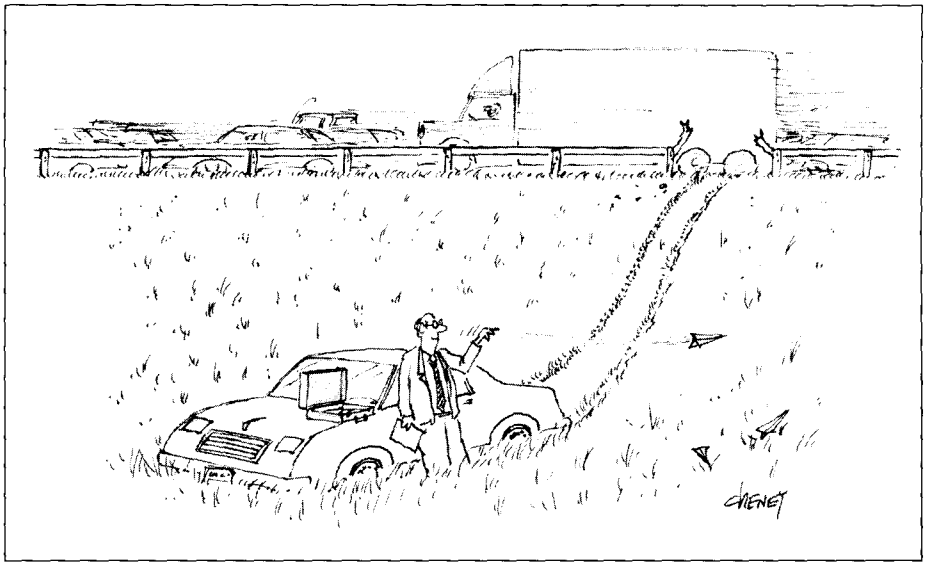
So variety
Is the way to win—
Then no one food
Can do us in.

—*May Richstone*

Bedroom Bedlam

There's a dog at the head, a dog at the foot,





With the Siamese cat in between.
The double bed was much too small,
So we traded it in for a queen.
Now there's so much extra room,
The other cat moved in, of course.
It only makes me thankful
That we don't have a horse.

—*Carla Kaufman*

Ah, Wilderness

Give me a trail on a magical day,
The hills up ahead calling the way.
Give me the scent of sweet-smelling woods
And let me discover all Nature's moods.
With song in my heart, what can I lack?
Oh! Give me a map so I can get back.

—*C.L. Margitson*

Ode to Realtors

My house is up for sale;
My life's an open book—
And ev'ry time it's in a mess
Somebody comes to look.
My house is up for sale;
My world is on display—
But when it's clean and tidy,
All the buyers stay away!

—*Margaret Montgomery*

Company Procedures

Company's coming! What work and worry.
I'm inundated with a flurry
Of mixing, cutting, scraping, dicing;
Is that my finger that I'm slicing?
Grilling, baking, broiling, toasting;
The kitchen's hot, I'm simply roasting!
The soup has overflowed the pot,
The stove's a mess, my nerves are shot!
My feet feel sore, my shoes don't fit.
Is there a chair? I've got to sit!

The doorbell rings! Is my hair mussed?
"WELCOME! *No, no, I haven't fussed!*"

—*Evelyn Wolkov Lewin*

One More Time

I can laugh at a joke
I've already heard;
I can reread a book
And enjoy every word.
I can rewatch a movie
And feel the suspense:
A bad memory's SUCH
A con-ven-i-ence!

—*Annie Komorny*

Up On Aging

I leaped with such alacrity
When I was young and strong.
I felt so acrobatic
I worked out all day long.

But now at 70 and more
I slowed down just a mite.
I go for walks and bike and swim
And read till late at night.

I have so many hobbies;
I'm good at baking pies.
I'll enter one at county fair;
This time I'll win a prize.

I don't want to be a boy again;
I have no need to run.
I like the place in life I'm in;
I'm having so much fun!

—*Lee Zimmer*

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One aim of the Saturday Evening Post Society, as you already know, is to

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May/June '94
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promote the good health of our readers. Of course, we also want you to enjoy reading, laugh at our cartoons and humor, play our games, answer our quizzes, stay updated on medical discoveries, and seek help for your personal health problems.

But you can't very well concentrate on reading or finding anything funny when you feel blah.

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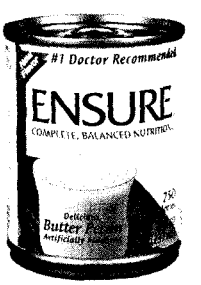

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THE AMERICAN ILLUSTRATORS HALL OF FAME

BACK TO SCHOOL DAZE

From fishin', frolickin', and foolin' around, the "whining" school kids return to the 3 R's.

No more lazing in bed. No more sauntering out to jump into the backyard pool. No more heading for the old fishing hole, or grabbing the old glove for a scrub game of baseball on the schoolyard diamond.

Oh, the boys and girls will be gathering at the school, all right. But the mean demon of changing seasons has cast a spell, turning the glove into a history book, the tennis racket into a notebook, and the jump rope into a pencil holder.

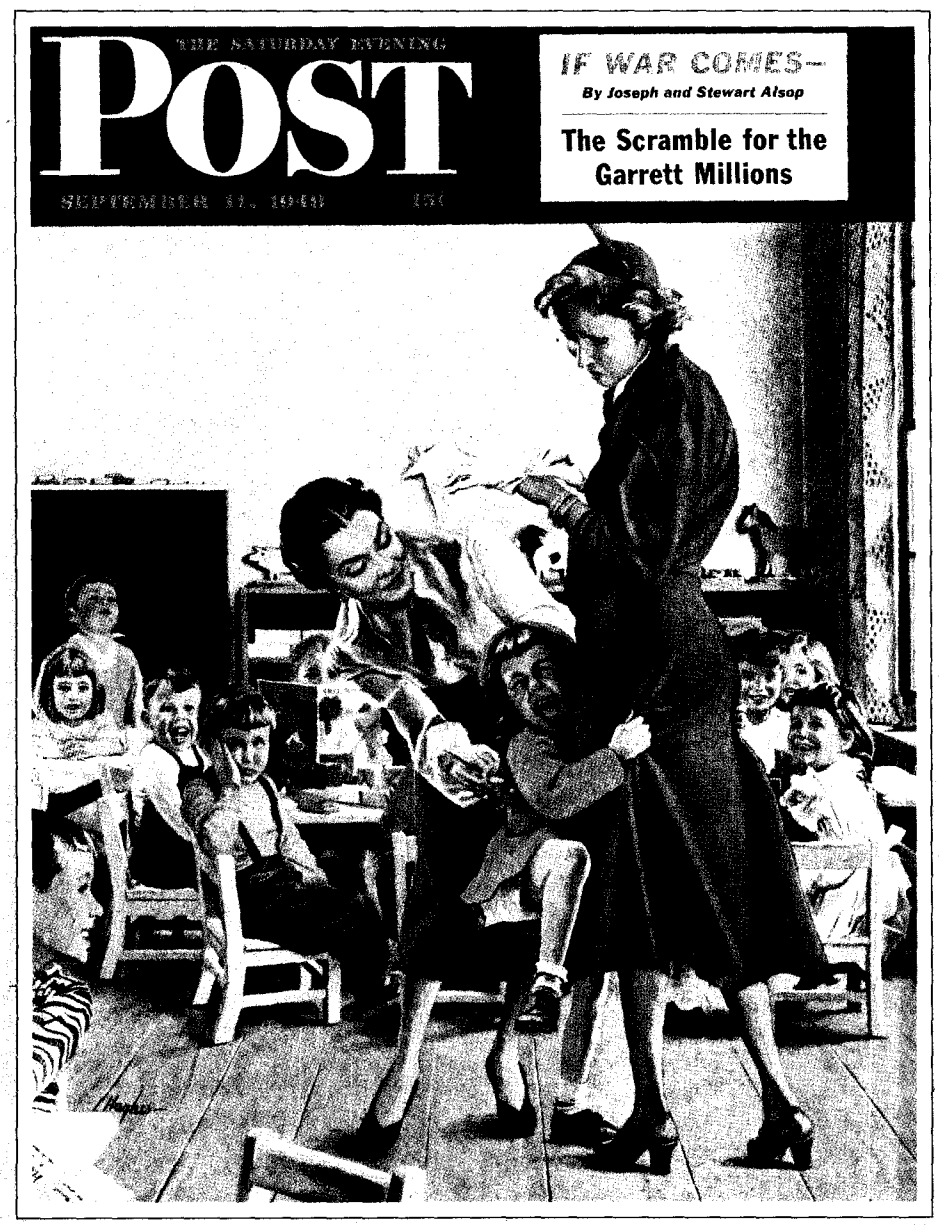
The summer sun has set; the summer fun has gone down with it.

Over the years, *Post* cover artists have depicted the scene, bringing to life Shakespeare's memorable words from *As You Like It*: "And then the whining school-boy, with his satchel/ And shining morning face, creeping like snail/Unwillingly to school."

These inspired illustrators out of the *Post*'s illustrious past leave no doubt that they were there. Reaching back in time, they have captured the trauma of parents watching their schoolboy about to disappear into that vast tunnel of knowledge for the first time; the little girl being torn from her mother's skirts and handed over to a strange schoolteacher; the frog that came into the classroom—and not for a biology exam; the young man in love with his tutor.

You may have forgotten such artists' names as Thornton Utz, George Hughes, and Dick Sargent. Nevertheless, the school-day covers that follow are sure to revive memories of your own "golden rule days of readin' and 'ritin' and 'rithmetic."

—Maynard Good Stoddard



Artist George Hughes knew what he was painting when he brushed this first-day-of-school scene for the September 11, 1948, Post cover. Asked if he had children of his own, the illustrator muttered, "Only five girls. The one who is crying on the cover is, of course, mine."

No, those are not strings of fish the boys are carrying home from the old fishing hole. We can almost hear them discussing that possibility rather than mathematics, however, as they "creep like snails" on their way to that dreaded first day back at the old classroom.

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THE SATURDAY EVENING POST

Illustrated W
Fou D. K728 by F in

September 11, 1937 5c. the Copy

Volume 210, Number 11

ROSE WILDER LANE • THOMAS WOLFE

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THE SATURDAY EVENING POST

An
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May 25, 1940 5c.

Volume 212, Number 48

NOT GUILTY By HAROLD L. ICKES

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The Saturday Evening
POST
February 25, 1956 - 15¢
WELL, IT WAS THIS WAY By GARY COOPER
General Ridgway's Own Report on THE KOREAN WAR
HISTORY OF THE WORLD
DICK SARGENT

When a boy finds humor in his History of the World *textbook, the librarian immediately leaps to the conclusion that there's something rotten in the state of Denmark. Artist Dick Sargent leaves us to speculate that she's about to discover the secret, warts and all.*

A teacher, by definition, should be short-tempered, long in years, and long in dresses. But when a tutor not only reverses this tradition but even puts her helpful pencil to the pad, artist Frances Tipton Hunter correctly has the boy looking at her figure, rather than her figures.

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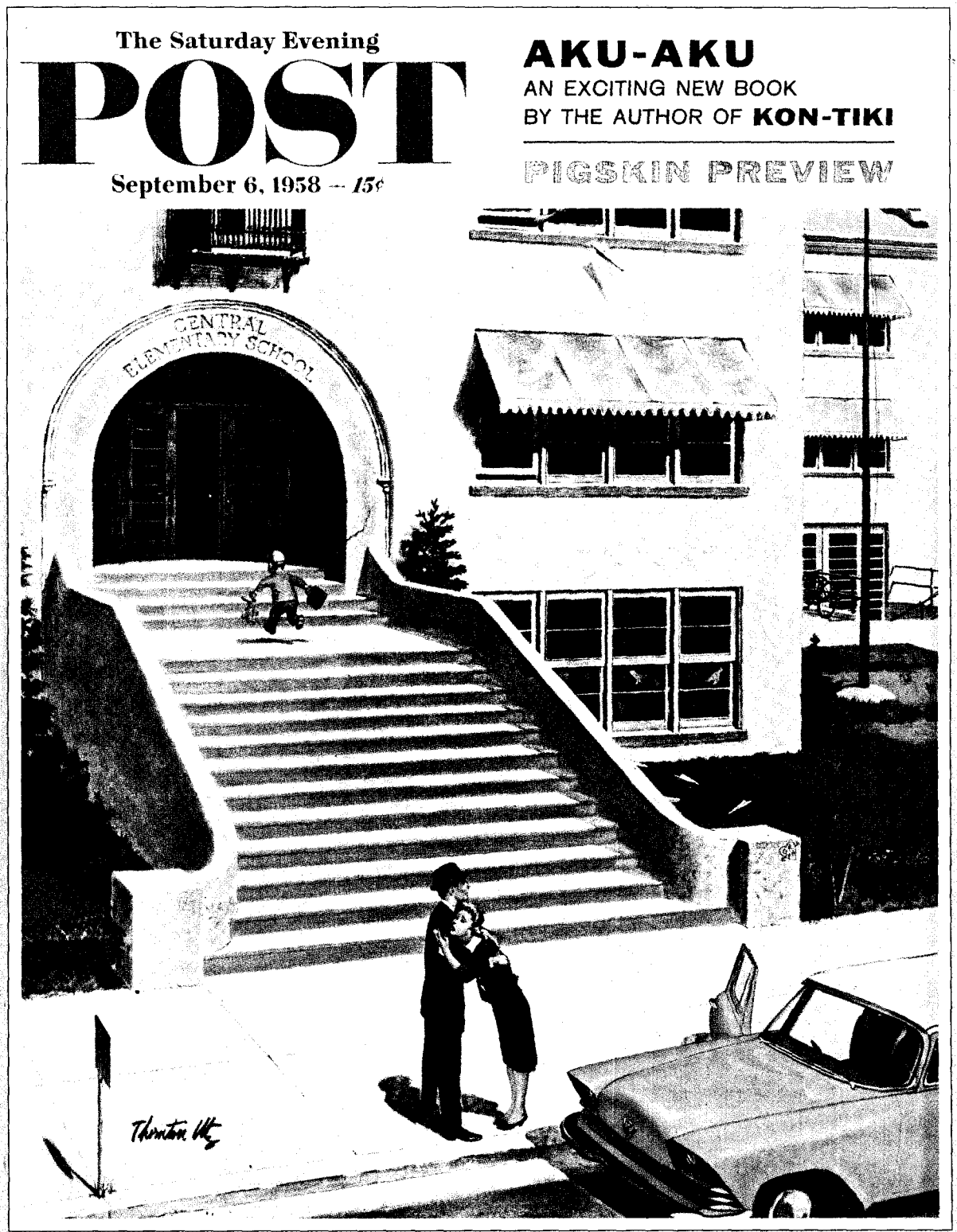

Eager for new adventure, little Johnny blithely bounds up the steps on his long road to education. Not so blithe are little Johnny's parents, in mutual consolation at seeing their innocent offspring leaving the protective family nest.

Three guesses as to where this young scholar with furrowed brow would rather be. He really doesn't need the subtle hint from Spot to tell him that while Rome burns, fish are jumping in the local fishing hole.

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THE SATURDAY EVENING POST

For[illegible]lin

June 10, '22

5c. The Copy
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Vol. 194, No. 50. Published weekly at Philadelphia. Entered as second-class matter November 14, 1879, at the Post Office at Philadelphia, under the Act of March 3, 1879.

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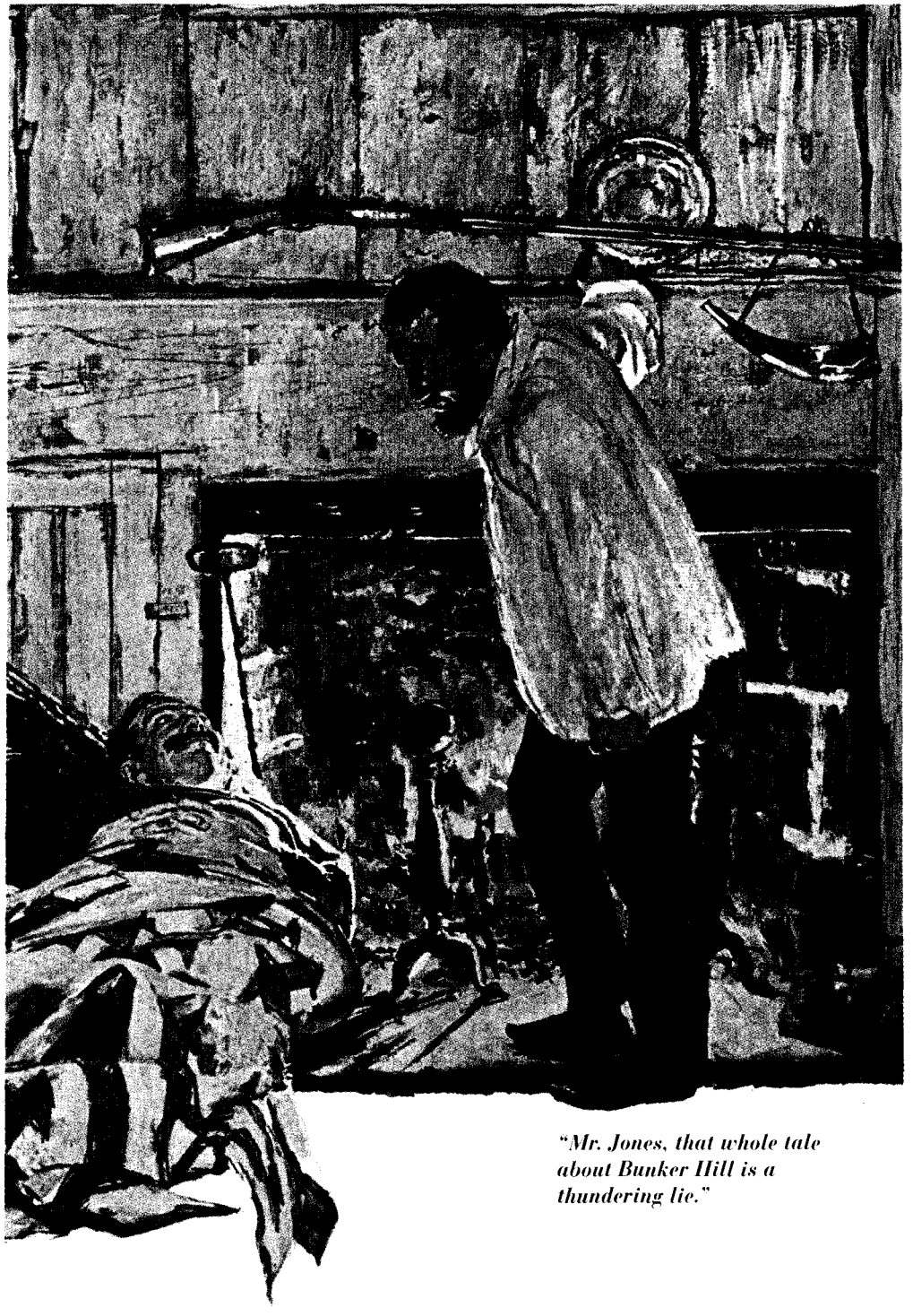
Prevarication Jones

This time, his tall tales cost him a lifelong job.



"Mr. Jones, that whole tale about Bunker Hill is a thundering lie."

By Leonard Wibberley

Everybody who knew him—and that included all the settlers along the Monongahela and a fair number farther west on the Ohio—agreed that he was the biggest tarnation liar west of the Alleghenies. They made this remark judiciously, aware that there was a lot of territory west of the Alleghenies and that in the year 1784 this territory included some of the most beautiful liars ever produced by a young, vigorous, and imaginative nation. Even his name attested to his reputation, for he was called Prevarication Jones.

"The Prevarication part is true," the boy's father said. "But as to Jones—why, I reckon that must be a lie like everything else, and his true name is likely Robinson or Williams or something like that." And then he gave a deep chuckle, a kind of hen's clucking as it were, in amusement at a man so talented in lying that people couldn't even bring themselves to believe that his name was what he said it was.

Prevarication Jones made three and sometimes four trips a year to the settlements along the Monongahela. His headquarters—or what he said was his headquarters—was Philadelphia. He was a packman, and on each trip he brought with him, besides his own mount, two pack horses whose saddles were laden with the kind of goods the settlers liked to buy. For the men he had English axheads and tenpenny nails and hammerheads and belt buckles—mostly of horn, but one or two special ones of hard iron. Also lead and bullet molds and springs with which to repair the cocking mechanism of their rifles. Sometimes, on special order, he would bring a rifle with him. But mostly he carried an assortment of parts from an assortment of rifles that his customers would paw through, looking maybe for a pan or a hammer or a spring or some such thing that would fit their own weapons.

For the women, Prevarication Jones brought mostly soap. To be sure, the

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women of the settlement—five families, including the boy's—could make soap of their own with fat and lye. It was good soap, but rough, and burned their hands if they got too much lye in it. But Prevarication Jones brought them special soap—Windsor soap, it was called. It was in nice little oval cakes and looked pretty; pink and yellow and white. And it was scented soap, smelling of roses or violets or some other flower.

All the women bought one or two cakes of the Windsor soap—"Made to the King's own formula," Prevarication Jones would say, as solemn as a parson at his psalms. They kept the cakes of Windsor soap on a high shelf in their kitchens and used it sparingly. The boy sometimes got a stool and reached up for his mother's cake of soap and sniffed at the fragrance in pleasure. He particularly liked to do this in the winter—to get the smell of roses when all around was deep in snow. That was a kind of miracle. Prevarication Jones was the man who made it possible, and the boy adored him.

Prevarication Jones traveled alone all the way from Philadelphia. The Indians weren't much trouble any more—not like they had been 20 years ago. And in any case he was a veteran not only of the frontier but also of the Revolutionary War and feared, as he put it, "neither man nor beast, savage or tame, but only God Himself." And then he would add with a shy smile, "And Him and me been friends for many a year."

The settlement in which the boy lived was on the right bank of the Monongahela, on a bluff overlooking the river. It was called Platts Landing, and the boy's father, Ephraim Platt, had built the first loghouse there. That was 15 years or so before, and though Ephraim Platt was not conscious of this, he was a part of the westward movement of the American people that followed the Revolutionary War and would spill over the Ohio and on into the territories even beyond the Mississippi until the time would come when there would be Americans living all across the continent from the Atlantic to the Pacific.

Others had come after Ephraim—the Blacks, from New Jersey, two years after: the Sawyers from Northeastern Pennsylvania a few months after the Blacks, and then the Pols and the Wainwrights. They all looked to Ephraim Platt as the oldest settler, and it was at his loghouse—there was a wall of stakes around it in case of Indian attack—that they met for social occasions.

In the settlement there were eight children of schooling age and five babies, and Mrs. Platt was of the opinion that the time had come to start a school. She was a very quiet woman and small, with hair so fair that, though there were several gray strands in it, they didn't show. Her hands were small and her feet were small, and she always looked neat, even when she had on the old black work dress that she wore while about her chores.

"We've got to have a schoolhouse, Mr. Platt," she said one evening to her husband as they sat down to their supper. "There's eight children in this settlement should be at school this very day."

"Then let their mothers teach them," said her husband . . . . "Boy, pass the salt dish . . . . Deer meat can stand a lot of salt, Mrs. Platt. Beef comes salty, being cured. But deer meat is fresh and must be salted if a man is to get any strength from it."

He reached out a big arm, and the boy passed the enameled bowl with the salt to his father. There was a Bible in their house and a picture in it of John the Baptist. Under the picture were the words A VOICE CRYING IN THE WILDERNESS. The picture showed a big man with long hair and a huge black beard that came to the middle of his chest. It looked very much like the boy's father, and he sometimes thought of his father as John the Baptist; a voice crying in the wilderness. Crying about what? Crying about America. Some message about America and how the people must come and settle the land and make the nation bigger.

"That first little loghouse that we built, Mr. Platt," said the boy's mother, "would make a tolerable schoolhouse for now. Later we will want something bigger."

"So it would," said Mr. Platt. "So it would. It would indeed. There is no doubt about it." When he sensed that he was being driven into a corner by his wife, Mr. Platt, for all his big size, capitulated without any fight at all. He agreed, as it were, with an overabundance of concord, asserting in several different ways that what she said was absolutely right. Sometimes he found that by these tactics his wife would become uncertain and retreat from her position, and the matter would be dropped. But this was not such an occasion.

"Good," said Mrs. Platt. "Then that is settled."

"So it is," said Mr. Platt. "So it is. Except for a few details. As, item: what about slates to write on? And what about books to learn out of—spellers, and such like? And what

ILLUSTRATED BY AUSTIN BRIGGS

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about benches to sit on? And what about someone to teach school?"

"We can get spellers and slates from Prevarication Jones," said Mrs. Platt.

"And who's to hold school?" asked Mr. Platt. "Not the men. They're busy in the fields. Nor the women, for they're busy in the fields too. Or with washing or mending clothes or making soap or cooking meals or caring for the babies. So who's to teach school? Answer me that, Mrs. Platt."

But it was the boy who answered. He didn't mean to answer. It just popped right out of him. And what he said was, "Prevarication Jones."

The boy's father had a gobbet of deer meat on his hunting knife halfway to his mouth when the boy said, "Prevarication Jones." The knife remained in midpassage, and Mr. Platt's mouth, the lips showing pink through his black beard, remained open, frozen for a second in surprise.

"Prevarication Jones!" he roared, when he had recovered. "There's a fine schoolmaster for you. The biggest tarnation liar west of the Alleghenies. Why, he'd stuff their young heads with nonsense until they couldn't tell black from white."

Mrs. Platt exchanged a quick look with her son. She saw that his eyes were brighter than they should be and his face pale with anxiety.

The boy lowered his head quickly and said, "I don't think he's a liar. Not on important things." He didn't say this very loud. He was talking to himself really, assuring himself that this was so. But his father heard him.

"Not really a liar, eh," he said. "Not on the important things, huh? Well, I can tell you everything he says is a lie, and what is particularly a lie is that story of his about the Battle of Bunker Hill. I know that's a lie, and if he had any regard for his reputation, he would leave that one out when he's spinning his tales."

"You enjoy that tale yourself, Mr. Platt," said his wife.

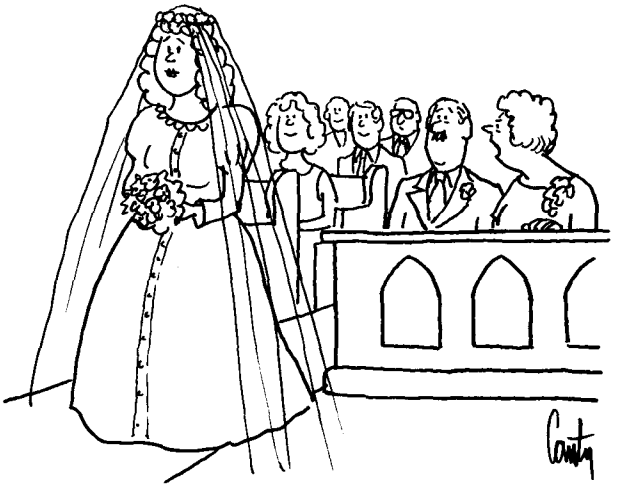
"Ah, so I do," replied her husband. "And that other one about being with John Paul Jones, on the *Bonhomme Richard*. Enjoy them very much. But they're both lies, like everything he says.

"Now I'll tell you what. If Prevarication Jones will just admit to that tale of Bunker Hill being a lie, then there might be some hope for him as a schoolmaster. But otherwise, no."

"Admit it or prove that it is true," said Mrs. Platt, looking at the boy. For answer Mr. Platt snorted and left the table.

Prevarication Jones visited the settlement two weeks later. That was at the end of June. He had his usual assortment of goods, not forgetting the scented soap for the women. And for Mrs. Platt he had brought a little silk bag full of lavender seed.

"I mentioned your name to my friend Mr. Franklin—Benjamin, that is," he said. "And he asked me particularly to bring this to you. The great ladies of France wear them sewn in their dresses, and he had it from the Countess of Vercennes. He would take it as a favor if you would accept it from him, though a stranger."



"I carried her in my womb for 9½ months, and you give her away."

Mrs. Platt was all blushes as she took the little silken sack of lavender and sniffed it and then handed it to all the other women, who exclaimed over it with gasps of pleasure. The men stood around grinning. They liked Prevarication Jones. There was no harm in him at all, and the little gifts he brought for the women gave them the kind of pleasure that they, in the rough frontier life, could not provide and indeed did not even think of. That lavender bag, for instance. It was certain that Benjamin Franklin had never seen it. But it was a pretty woman's thing, and long after the last fragrance had gone, Mrs. Platt would treasure it and might even come to believe that once it had been worn by one of the great ladies of France. So she would have a tiny link, even if it were imaginary, with Paris and the great, exciting world beyond the mountains.

When he had made the initial sales from his pack and given all the women some little trinket—always with a sort of footnote that it had once belonged to some great man or woman—Prevarication Jones was brought into the Platt house and given a meal of breast of venison with corn stuffing and potatoes and a special gravy that he pronounced superior to the best to be had anywhere.

And then, for this was always the custom during his visits, the whole settlement gathered in the Platt loghouse, and listened while Prevarication Jones told story after story. Some of the tales his audience had heard before, but nonetheless they delighted in them. There was the tale of the Maumee Indian chief he had met and whose life he had saved.

"He gave me," said Prevarication Jones, "this stone here. It is a bluish stone as you can see, and it has this curious property, that laid between any wound and the heart, it will instantly combat any malignancy and speed the healing of the wound in a miraculous manner."

The stone was passed from hand to hand, the children holding it the longest, their eyes big with wonder. One little girl put it on her doll, from which the foot was broken off. Seeing this, Prevarication Jones exchanged a barely perceptible nod with her mother, and the boy knew what that meant. Prevarication Jones would provide a new foot for the doll during the night when the girl was asleep.

Then he told the story of the eagle that had carried away a sleeping child in the Hampshire Grants and how by using a bull-roarer—that is, a long string with a weight on the end, whirled above the head to produce a deep hum—he had charmed the eagle to the ground and returned the infant unhurt to its mother.

It was Ephraim Platt, who not without a measure of vindictiveness, prompted him to tell the story of Bunker Hill.

"June 17th, 1775," said Prevarication Jones, for this was the way he always commenced his account. "And as

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nice a day as a man could expect in that part of the world. I particularly recall the grasshoppers singing in the long grass before our works. The grass came up the flanks of the hill toward our works. It was pale gold and should have been cut for hay, but had been left until the summer was a little further advanced. It was to be cut that day—not by scythes, but by bullets. The British lined the foot of the hill at the shore, and some of their war vessels had been bombarding us all morning. Now you'll say it's strange that over cannon shot I could hear the grasshoppers singing. And yet I could, and thought it strange myself. Most of the shot was spent when it reached us and rolled along the ground like bowling balls—18-pounders they were.

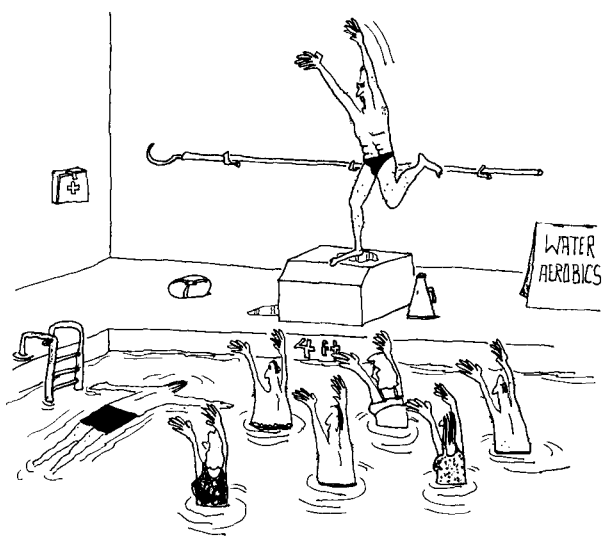
"We'd been all night putting up the defenses. Mostly we dug a ditch and threw the earth in front in barrels and sacks and suchlike containers, and were thirsty about noon. Two boys went back over the peninsula, but all they could bring for us to drink was rum, and heady stuff it was too.

"About noon, I would say, the British were ready. There were three lines of them at the foot of the hill—three red lines as straight as pokers. I remember an English officer's voice saying something—quite sharp, though I couldn't catch the words. Then there was another voice, and the words came to us clear, for the cannon fire had died down. They were, 'The infantry will advance on the enemy's works.' It gave me quite a turn, hearing that quiet voice coming up the hill and realizing that we were the enemy. Three meadowlarks rose up in the air right then out of the long, pale-gold grass, and I thought it might be a sign of some kind. I turned around because it frightened me to see those redcoats come on in such fine formation and saw General Washington standing right behind me.

" 'Don't shoot until you see the whites of their eyes,' he said, and I can tell you that those words steadied every mother's son of us. . . ."

So the tale went on, very vividly told, of the repulse of the first assault and then the lack of powder and men giving a ragged volley and doing what they could with spades and mattocks against the English bayonets. Not a word was uttered by the audience during the telling, and at the end there was a stirring, like a sigh of content and pride that the challenge had been met. The men had stood and America had been born that day.

Even Ephraim Platt was moved and, watching his son's solemn face, his small jaw set tight and his lips pulled into a thin line, he was glad that he had not interrupted, as he had planned, and pointed out that he knew for a fact that George Washington had never been present at Bunker Hill and Prevarication Jones neither and so the whole thing was suspect.



"Come on, Mr. Oswald, try to keep up with the group."

But, moved as he was, he still was determined that the man wouldn't do as a schoolmaster. His wife might be set on it and the boy might want it, but a schoolmaster had to know the truth from a lie. And Prevarication Jones didn't.

Ephraim Platt, though a man of sentiment, was also a man of purpose. And when the audience had gone and the boy had gone to bed, he confronted Jones before the dying fire.

"Mr. Jones," he said, "that whole tale of yours about Bunker Hill is a thundering lie, and you know it. You weren't there and neither was George Washington. He didn't take command of the Continental Army until after the battle had been fought.

"Now," he continued, "there's some thought of starting a school here, and Mrs. Platt has you in mind for a schoolmaster. You are an educated man, I have no doubt. But you'll understand that we can't have a schoolmaster who is a tarnation liar. If you'll admit to me, man to man—just me, mind you—that that story of Bunker Hill is nothing but lies, since you weren't there nor George Washington neither, then you can settle here and teach school, and the community will support you. Otherwise it's a packman's life for you to the end of your days. And you are not getting any younger."

"Mr. Platt," said Prevarication Jones, "I regret that you take that view of my tale. And now, sir, I am weary and would like to sleep."

The boy watched him for a while as Prevarication Jones lay on the two benches which served him as a bed before the fire. He did look old. *What happened to packmen when they were old?* the boy wondered. *Who took care of them?* It became all the more important that Prevarication Jones become the schoolmaster in the settlement. But he would never admit that George Washington had not spoken to him at the Battle of Bunker Hill. Maybe it wasn't true, but Prevarication Jones, the boy sensed, would never admit it. And then maybe it *was* true. There was only one man who could say so, one way or another—a man who had a reputation for never telling a lie.

The boy went over to his mother's bed. She woke, as she always did, as soon as he stood beside her. He bent over and whispered something in her ear so as not to disturb his father, and she got quietly out of bed after only a slight demur and, taking a sheet of paper and pen, started to write at the kitchen table.

Prevarication Jones left early the following morning, announcing that he would likely be back in September, and all summer long the boy kept thinking about him. The school was opened in the settlement, and the women took turns at teaching, but it was not really satisfactory because, although they could teach ciphering and arithmetic and reading, they knew little of history or geography or other subjects. And sometimes they were too busy to teach, and there was no school. Even Ephraim Platt agreed that

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THE LITTLE STUDIO THAT COULD

Nest Entertainment lives up to its name with a $35 million animated film designed to "feed and nurture the young" and win the approval of the American family.

by Todd Coleman

The ancient castle is decked with banners. Guests arrive from distant lands, stepping from their coaches onto the rolled-out red carpet, where they are greeted by a prince, a princely frog, and the one whose debut they've come to see—the princess.

The coaches—luxury buses arriving from the nearby Cannes Film Festival—are part of an exquisitely planned celebration of *The Swan Princess,* a full-length, classically animated fairy tale in the tradition and quality of Walt Disney's *Beauty and the Beast.* But for Matt Mazer and Rick Rich, the tuxedoed visionaries who, independently of any studio, produced the $35 million film, tonight is much more than a fairy tale—it is a dream come true.

That dream began in 1986 when Rich, a director of animated feature films at Walt Disney Company (*The Fox and the Hound*), opened his own animation studio in Burbank and began producing half-hour religious and historical videos for children.

"From the day we started, everyone knew that our goal was to do a feature," says Rich, who, like most of his crew, had been trained at Disney in the studio's classic animation style. Working with writer Brian Nissen, Rich developed a script called "Rabbit Hill," but later decided that a fairy tale would make a better motion picture debut. "Swan Lake," a German folk tale about an evil sorcerer who turns a princess into a swan, had never been done as a feature film. The tale appealed to Rich, not only because it is a love story and a classic fairy tale, but also because of the visual possibilities of the princess' nightly metamorphosis.

While continuing to work on the animated videos, Rich and Nissen developed and wrote 12 different drafts of the "Swan Lake" screenplay. The major studios in Hollywood were excited and intrigued about the project, but none were willing to take the risk of financing it. The response was always the same: "We love the story, but we think Disney's the only company that can make and sell animated features."

Finally, in March 1992, Jared Brown and Seldon Young, who had been financing the half-hour "edutainment" videos, stepped forward and

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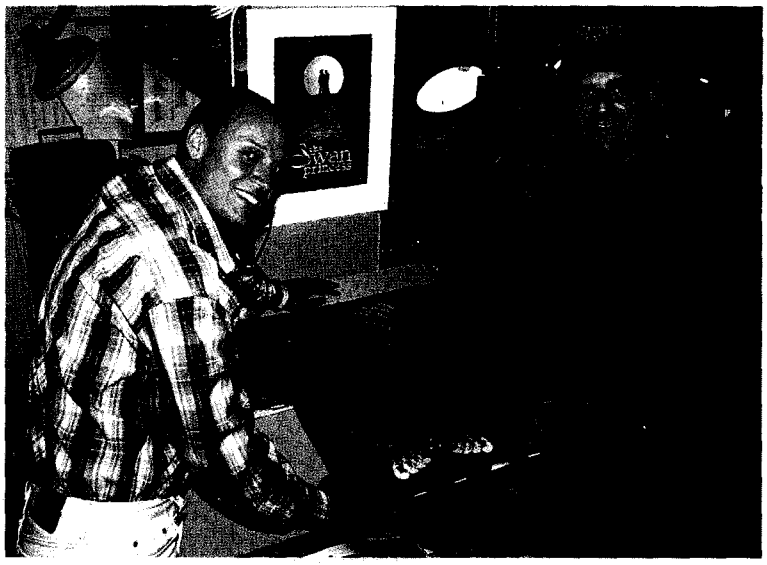
committed the $35 million needed to produce and market what would later be called *The Swan Princess*. Brown, referring to the dogged persistence of Rich and his team, explained simply, "I didn't want to miss the party."

A holding company was created—Nest Entertainment—that allowed Rich Animation Studios, Family Entertainment (which was distributing the videos), and a cassette duplicating company to be combined under one banner. With a separate infusion of capital from Prudential Equity Investors a year later, Nest Entertainment was now positioned to be a major producer of animated feature films.

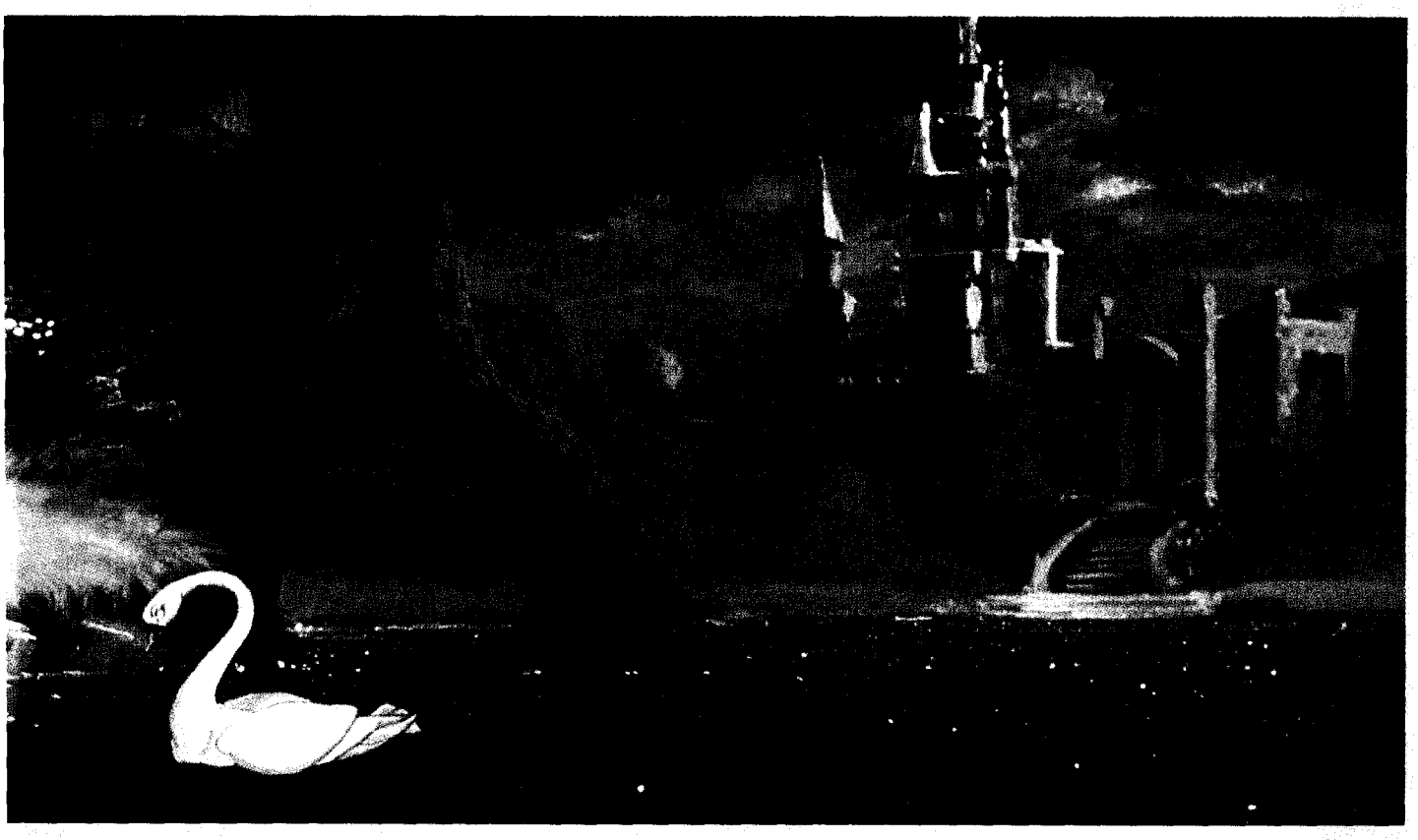


***Swan* co-executive producer Matt Mazer and producer-director Rick Rich combined their experience and talent to make a breakthrough in the narrow field of high-quality animated features.**

However, an important ingredient was still missing. Who would take the film to Hollywood? Who would create a marketing campaign, find promotional partners, enlist a distributor who could handle the film with the same passion and care as its Nest-building creators?

While talking to financiers, Rich had met an executive at Goldcrest Films and Television whose experience was custom-made for the job. Matt Mazer had already developed a successful marketing and promotional campaign for a non-Disney animated film, *All Dogs Go To Heaven*, and before that had spent three years as a marketing executive at Disney itself, where his accomplishments included setting up long-term promotional partners (such as McDonald's, Sony, and Lipton) for animated and live-action films. When Goldcrest eventually said no to *Swan*, Mazer said yes and joined Nest Entertainment as executive vice president.

Rich Animation Studios then went through a metamorphosis of its own, growing from 28 employees to 265 in less than two years. The studio first hired storyboard artists to visualize the script, then hired animators to draw the different characters and layout artists to create the lush backgrounds of forest, lake, and castle. The company's timing was extremely fortunate: two other animated films had recently completed production, so there was an unusually large talent pool from



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which to draw.

However, there were growing pains as well. Different animators brought with them different styles of working, which sometimes didn't blend. Nevertheless, thanks to the studio's short-term projects—eight to nine half-hour videos a year—new employees could cut their teeth on video animation, learning to work together as a cohesive team before moving on to the feature film.

The working atmosphere at Nest was important to Rich, who was eager to avoid the kind of bureaucracy and politics common at larger film studios. Thus, the third floor offices were designed as a loop, with Rich's office in the middle of all the animators. Persons wishing to meet with him simply had to sign their names on the clipboard outside his office for a same-day appointment.

"Respect is always totally earned," says Rich, a father of six, "and when it's earned, people will do anything for you. I get here at 6:00 every morning, and strangely enough, there's usually a handful of people already here."

Over the past two years, the work-in-progress film has been screened many times for the entire staff, thus giving each member of the company a sense of pride and ownership—and often resulting in new ideas and jokes to improve the film. "Rick will take a good gag from anybody," says Mazer. "Even me."

"We named the company Nest because, by definition, 'nest' is a sanctuary, a place where you feed and nurture the young," says Nest CEO Stephen Griffin.

It was Mazer's idea to have bad-guy Rothbart, who is "voiced" by the gruffly charming actor Jack Palance, do one-armed pushups in one of the film's flashy, Broadway-style musical numbers—just as Palance had done at the 1992 Oscars telecast. Kids in the audience may miss the joke, says Mazer, but animation at its best appeals not only to children, but to the parents and grandparents who pay for the tickets.

A typical day for Mazer begins at dawn, although it often starts in mid-air: waking up on a "red-eye" flight to New York, Chicago, Toronto, Atlanta, or Boston.

When at home, Mazer starts his phone calls at 6:00 a.m.—to the British publisher of Nest's children's books, to the Japanese distributor releasing *Swan* in 1995, to the New York media agency that is buying TV ads that won't run for another six months. By 7:00 a.m., Mazer has also spoken to a Manhattan printer about the movie posters, to a promotions company about in-store displays for retailers, and to a Washington, D.C., research firm about audience reactions to the latest test screening.

At 7:00, Mazer gets a fax from Don Barrett, his senior vice president of marketing, with reminders for the day, a summary of the morning's entertainment news, and a joke—in case Mazer already needs cheering. After calling Rick Rich to plan the day, Mazer heads off to an 8:00 breakfast—this time with Turner Home Video, which will release the *Swan* video next fall. Later, he heads for the office, returning phone calls along the way on his car phone.

All kinds of "great stuff" is awaiting Mazer's approval at his Burbank office: artwork, videos, and various products from the film's 90-odd agencies and licensees.

"The most fun I had this week was looking at these cute little shoes made by Angel-ettes; I ran around for half an hour showing them to everybody." Mazer brings in a pair, and they are, in fact, adorable—down to the very sole, where the beautiful Princess and the *Swan* logo are built right into the tread. "Even though they only come in kids' sizes, everybody wants a pair," says Mazer, sounding a bit like a kid himself.

The kind of collaboration that takes place inside the company has extended outside as well. When it came time to design the Princess' bridal gown for the final sequence (unlike the ballet *Swan Lake*, this movie has a happy ending), Rich and Mazer let the Tyco toy company give its opinions, which were then incorporated into the film

No ordinary enchanted amphibian, *Swan*'s Jean-Bob, voiced by John Cleese of Monty Python fame, is a frog who thinks he's a prince and longs for a kiss from Princess Odette.

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itself. "We agreed that the people at the toy company probably knew what little girls wanted to see in a bridal gown a lot better than we did," says Mazer.

Nonetheless, merchandising, though important, is always secondary to the film itself, says Mazer. "It's not about merchandise; it's about fantasy. When I was a kid, we had Davy Crockett stuff; I had the hat with the clip-on tail. It made it all the more fun and all the more real because you identified with the characters. The merchandise validates the experience and extends the fantasy, but the experience is

"The magic and wonder of going into a big, dark theater with your parent or grandparent and sitting down with a whole bunch of other kids and seeing a wonderful animated movie . . . is truly one of the last, traditional, shared family entertainment experiences available."

going to the movie."

"We named the company Nest because, by definition, 'nest' is a sanctuary, a place where you feed and nurture the young," says president and CEO Stephen Griffin, who has dropped in today from Nest's headquarters. "We want the Nest logo to be a seal of approval by the American family, so that when they sit down in front of a movie screen or television screen, or they open up a coloring book or listen to a musical cassette, parents will know that this is entertainment they can trust and enjoy."

As the last of the 220,000 animation cels are painted and photographed, and the voices of Jack Palance, John Cleese, Sandy Duncan, and Steven Wright are mixed with the last-minute sound effects, what is Rick Rich most proud of?

"I really feel we have a chance to open up the whole animation industry," he says from his corner office, with its wide views of the San Gabriel Mountains. "These last two years have been magical. Everyone senses that this is probably the best animated film that's ever been done outside of Disney. And I think that will be our greatest success, to open up the field, to show that someone else can do it."

New Line Cinema's Thanksgiving release of *The Swan Princess* is the culmination of years of hard work, but is only the beginning for a once-small company that now plans to release a high-quality animated feature every 12 to 18 months.

"The magic and wonder of going into a big, dark theater with your parent or grandparent and sitting down with a whole bunch of other kids and seeing a wonderful animated movie—that whole special time together is part of a cultural continuum that started in 1937 with Disney's *Snow White*, and it is truly one of the last, traditional, shared family entertainment experiences available," Mazer says.

"Parents tell us in research that they want their kids to remain kids just a little bit longer. Classic animated pictures are experiences that allow kids to stay kids and parents to be kids and everybody to have a good time . . . together." ★

Some 220,000 animated cels bring life to the *Swan Princess* characters, which include an evil enchanter, a slow-talking tortoise named Speed, and a tough Irish puffin.

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ACHY BREAKY NECK

Thinking it might be bad for a circulatory system to go three full days without bleeding a drop, his dear wife began hanging cast-iron pots from the ceiling.

by Maynard Good Stoddard

Illustrated by Don Trawin

Now that we have dismissed as ridiculous the subject of my trifling with the truth," I said to my dear wife, Lois, "how about discussing the episodes in which you have unquestionably tried to kill me?"

"I've never tried to do you in," she protested, chuckling over what must have been remembrance of one of the episodes.

It could have been the one in which I had no more than mounted the seat of my big red 11-horse Murray mower than she yelled above the roar of its mighty engine, "While you're at it, how about mowing under the pine trees while I hold the branches back?"

At this point, I should have remembered how she had promised to hold the stepladder while I strung lights on the blue spruce we were decorating for our first (and last) outdoor Christmas tree. No sooner had I arrived on the most treacherous step on the ladder than over it went, leaving me draped across the barbed wire fence. The puncture wounds would leave my frontal area looking like a cribbage board for the next two weeks.

Upon inquiry, it seems that she had let go of the ladder because the next string of lights was tangled and she knew I'd be mad if she handed it up to me before straightening it out.

"Better mad than dead," I explained, my gentle breeding being the only deterrent to straightening her out.

So now she would be holding the branches back while I mowed under the pine trees. Common sense being not all that common, I fell for it.

Give the dear girl credit; not until way along on branch number two did she let it go, just as I was approaching. (Her glove had come off, she explained with a straight face.) The released limb having knocked me off the mower, dear wife heroically flung herself across the vacated seat and directed the vehicle through the branches of the adjoining tree until it slammed to a stop against the trunk.

Only after shutting off the engine and walking twice around the mower did she come over to where I was lying and say, "Don't worry; it's not hurt a bit."

Perhaps you remember when she assigned me the task of painting the outside trim on the window frame where she couldn't reach and thoughtfully had erected a scaffold for my convenience. She contrived the scaffold by suspending a board between a potato crate and a stack of bricks, with the rotten side of the board cleverly turned under. I no more than dipped my brush into this gallon bucket of black paint than the board gave way, causing me to paint a stripe the full length of the window on my way down. What the bucket of paint did to my Greek-god torso below the waist remains unrecorded.

I once went three full days without bleeding a drop. Thinking that this might be bad for my circulatory system, my concerned wife began hanging cast-iron pots from the ceiling, filling them with potting soil, adding a sprig of hollyhock, and calling the result macramé. What I called these booby traps has also gone unrecorded. Standing a mere 5'5" in high heels, she cleared the devices nicely, whereas they caught me just above the eyebrows. As a result, the well-shaped head I once prided myself on soon assumed the contour of a Hubbard squash.

Installation of the pipe for our Ben Franklin wood-burning stove provided yet another opportunity for my dear wife to collect on my life insurance policy and head for Rio and a hand-kissing Latin vulture. Her part in this looming disaster was to support the stovepipe with the broom while I, from the convenience of a stepstool, directed the five lengths of pipe into the chimney hole.

Why a healthy woman's arms would give out, as she claimed, after only 15 minutes has never been cleared up to my satisfaction. What I do know is, when the stove lengths parted company, the one directly above my head relieved me of my already shaky stance on the footstool, and had it not been for the layer of soot now covering the floor, that might well have been all she wrote right there.

This brings us to the episode that will likely go down in the family annals as The Day Dear Wife Removed the Ladder. Hoping to reduce, or by some miracle completely stop the leak, I had been talked into scaling the ladder to tar the metal roof over our glassed-in front porch. Because of the pitch of the roof, however, no sooner had I inched my way to the top of the incline than I began sliding back. Looking around to make sure my feet would hit the ladder . . . no ladder!

Luckily, by now, the bucket of tar had tipped over, coating my underside and slowing my descent, thereby providing several more seconds for my life to pass before me. Not until my remains had been discovered behind the spirea would I learn that dear wife had borrowed the ladder "while I was up there" to pull ivy off the siding. She became upset for having to explain it three different times, my upturned ear being filled with tar at the time.

I still have nightmares from my attempt to get into the exercise thing by doing a few leisurely sit-ups. Discovering that I was unable to sit up without hooking my toes under something, I went into the kitchen to hook them under the electric range. Along about number three trying for four, my bride of 57 summers (I don't count the winters, because of those ski-type pajamas) came in from her annual chore of mopping the back porch.

"Oh, good heavens!" she cried,

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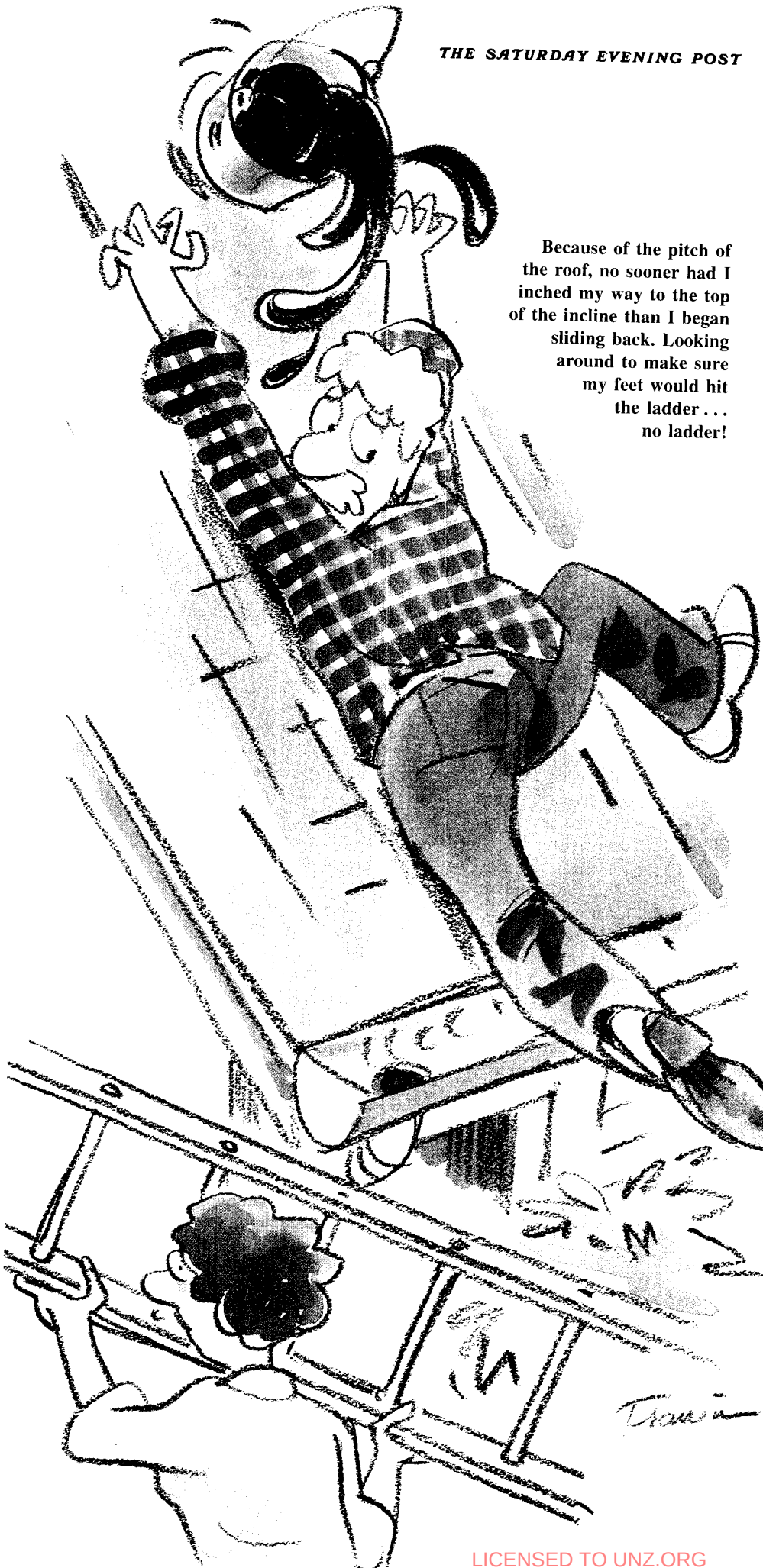

Because of the pitch of the roof, no sooner had I inched my way to the top of the incline than I began sliding back. Looking around to make sure my feet would hit the ladder . . . no ladder!

dropping her mop and bucket of suds and straddling my stomach, from which position she began hammering on my chest.

"What-in-the-blue-blazes-do-you-think-you-are-doing?" I sputtered.

"EPA," she explained, obviously pleased that she had revived me to the point where I could talk.

"It's CPR," I moaned. "EPA is the Environmental Protection Agency, for Pete's sake!"

"Whatever ... it has saved your life."

"You came closer to killing me," I said, dumping her off, removing the mop handle from my forehead, and wringing the still-hot suds out of my sweatshirt. "I was only attempting a few sit-ups."

"And you've probably got the stove all out of kilter," she said by way of apology.

Finally (and I'm sure you are more than ready—I know I am), I call your attention to the birdbath experience. It happened after my dear wife complained, "The birdbath is full of water." You are probably thinking a woman has to be hard up for complaints to reach this level. But no, the problem was that the birds had never so much as dipped a toe in this concrete lavatory to test the water. That's why we were using it as a feeding station.

Now, I had been asked to leave the refuge of my typewriter, gird up my loins, and tip up this 80- or 90-pound bowl to let the water drain. Having failed to gird my loins high enough, however, the thing got away from me, and all 150 pounds landed on my best foot, the one without the black toenail from another incident we won't go into. Only a determined will to live got me back into the house.

"What happened to you?" asked you-know-who.

"The birdbath fell on my foot," I whined.

"Oh," she said, resuming her hanging of another macramé device in my new route to the bathroom. "I thought maybe you'd been hurt."

That's the trouble with being married to a nurse. I could come in with my head hanging from a single neck cord, and she'd say, "I can remember a man coming into Emergency carrying his head under his arm . . . take a couple of aspirin and forget it." ▲

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THE WILD MAN

He was sicker by far than any other patient in ICU, but no one had any idea why, and there was no medical history.

by Lawrence Martin, M.D.

Illustrated by Mario Noche

Joe Cartney was one of our most difficult patients, and we almost lost him. He showed up in our emergency department—dumped there is more accurate—one cold Saturday morning. It seems his brother or brother-in-law brought him in because he, Joe, was "taken real sick all of a sudden." After imparting this message to a secretary, Joe's relative sat him on a waiting room chair and went to "park the car." He did not return.

Left behind was a young man too sick to stay in any chair. He fell to the hard linoleum floor and proceeded to moan and wail. The ED nursing staff responded with a quick check of his vital signs and lots of questions: "Who is this? Where'd he come from? What's his name?" Only the hapless secretary had any information: "Mr. Joe Cartney . . . brother [brother-in-law?] brought him in . . . said he's real sick, then left . . . said he'll be right back . . . didn't leave any phone number . . . didn't sign any forms."

One of the ICU nurses answered the phone, took the message, and hung up the receiver. "We have a wild one coming. A male."

As for the patient, all he could do was scream and flail his arms. Four of the staff lifted Mr. Cartney to a stretcher and brought him to the treatment area, then placed him in a bed. If acutely ill, at least he was in the right place.

He could give no history worth a penny. He just moaned and screamed at the slightest provocation, calling for "Emma," presumably his wife or girlfriend, and various other people whom he could or would not identify. He knew his name, but not the day, year, where he was, or how he got there. He could not answer any question coherently. He frequently resorted to scatological phrases.

Joe Cartney was, in a word, delirious; though acutely ill, he was simply unable to communicate his problem. The ED staff had no more history than a veterinarian presented a sick dog found on the street. Methodically, the ED physician and nurse documented what they could:

Vital signs. Blood pressure stable at 130/70; pulse irregular at 150 to 170 beats per minute (normal is less than 100 per minute). Temperature: 101°.

Physical exam. Young male, undetermined age. Medium build. Appears disheveled, unshaven, dirty. Skin moist and sweaty. No obvious signs of trauma or recent injury. Three tattoos noted: "Emma" over left arm, skull and crossbones over right arm, and "Born to die" over chest. Scars over abdomen, right thigh (knife wound?). No neurologic defects, nothing to suggest he had suffered a stroke. Able to move all his extremities.

Cardiac rhythm. Irregular, with many extra heartbeats. Technically, this is known as "supraventricular tachycardia with numerous multifocal beats."

Arterial blood gas test. Adequate oxygenation and ventilation (i.e., his lungs were working normally).

Other blood tests. Results pending, including a "toxic screen" of his blood and urine for drugs commonly used to overdose.

Chest x-ray. Clear; no evidence for pneumonia.

Those first few minutes, Mr. Cartney didn't need cardiopulmonary resuscitation, or anything else heroic. What he did need was lots of attention—to keep him stable and in bed, to exchange his clothes for a hospital gown, and to find out what was ailing him. First guesses were acute alcoholic intoxication or withdrawal from alcohol, toxicity from illicit street drugs like PCP (phencyclidine, or "angel dust"), or some type of nervous system infection, either meningitis or brain abscess.

He did not carry the smell of alcohol. Nor did he appear yellow, bloated, or wasted like an end-stage alcoholic. As for PCP, detection requires a urine measurement, ordered as part of the tox screen. In cases like this, until all the information is available, it is best to assume some type of drug overdose and manage accordingly. On that assumption, the ED physician placed a large, snakelike hollow tube through Mr. Cartney's nose and into his stomach. Through the tube, she squirted some "activated charcoal," a highly absorbent black slurry that binds whatever pills or tablets it touches. After a few minutes, the charcoal was sucked out of Mr. Cartney's stomach and with it, hopefully, any poisons he might have swallowed.

Of course, the ED team had no specific history for drug overdose, so other possible diagnoses were also considered. Meningitis, for instance, can be confirmed (or excluded) with a spinal tap and quick exam of spinal fluid under a microscope. But a spinal tap requires careful insertion of a thin needle in the patient's lower back, and Mr. Cartney could not stay still for that procedure. For the same reason, a brain CT scan was not feasible, since it also requires a still patient.

And still he was not. Within 20 minutes of arrival, he was referred to as the "wild man." To keep him in the bed, the ED team bound all four limbs with leather restraints securely attached to the bedframe. Every minute or so, he would try to sit up, pull against the restraints, and bellow, "Get me out of here you ——!" Joe Cartney was a danger to himself, so he needed the restraints.

Acutely ill patients who pose a diagnostic dilemma, like Joe Cartney, may be kept in emergency for hours, while tests are run and the problem sorted out. Does the patient need surgery? Admission to an intensive care unit? More tests in the ED? Joe Cartney was the epitome of diagnostic dilemma, but the ED staff did not wait for more tests; they sent him up to medical intensive care after only 30 minutes, a record for a patient not needing emergency surgery.

I was already in the ICU, making Saturday morning rounds, when the call came from the ED nurse. One of

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the ICU nurses answered the phone, took the message, and hung up the receiver. "We have a wild one coming. A male."

"What's wrong with him?"

"They don't know. Possible overdose, possible meningitis. They said he's wild and very sick."

Oh, oh!

Mr. Cartney arrives, accompanied by three security officers, plus an ED nurse and physician. He is half sitting on the transport bed, bellowing and pulling on his restraints. A thick black tube sticks out of his nose, and I see splotches of charcoal on his bed and hospital gown.

The ED physician gives me a one-minute capsule history, finalizing her recitation with, "This guy's real sick; we don't know why, but he needs to be in ICU. Maybe an overdose, maybe meningitis, we don't know. There's nothing more we can do for him downstairs. He's all yours now."

We undo Mr. Cartney's restraints and transfer him to the ICU bed, then reattach the leather straps. The ED and security folks promptly disappear. As the ICU nurses go about their business, I move to the head of the bed and look at our new patient. He becomes eerily silent and stares back at me. He is maybe 29 or 30 years old. His eyes are wide open, and he does not appear to be in pain or even any distress. (Then why all the wailing?) The sweat on his brow, dilated pupils, and pulsating neck veins all give the appearance of acute intoxication, but with what?

I try a direct approach. "Mr. Cartney, what did you take?"

No answer.

"Did you take PCP?"

"Yes," he responds, slowly and in a

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low moan. His answer is not convincing, so I persist.

"Did you take alka seltzer?"

"Yes."

"Did you take XYZ?"

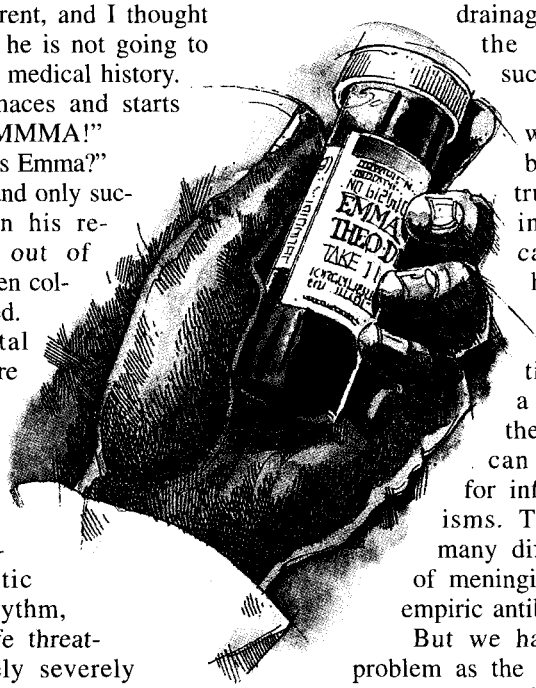
"Yes."

We seldom ask yes or no questions because we can't trust the answers, but this guy is not coherent, and I thought it worth a try. Alas, he is not going to give any meaningful medical history.

Suddenly he grimaces and starts yelling again. "EMMMMA!"

"Mr. Cartney, who's Emma?"

He tries to sit up and only succeeds in pulling on his restraints. "Let me out of here!" he bellows, then collapses back to the bed.



We take his vital signs. Blood pressure 120/65, pulse irregular and ranging from 150 to 180 beats per minute, temperature 100.5°. His electrocardiogram shows chaotic supraventricular rhythm, not immediately life threatening, but definitely severely abnormal. Throughout all this activity, everyone wonders, *What's wrong with him?*

In another ten minutes, we have more data. His tox screen is . . . negative. Neither the urine nor blood samples reveal any of several drugs commonly taken in overdose.

So PCP toxicity is, apparently, ruled out. Most of the other drugs tested for are analgesics, tranquilizers, sedatives, and antiepileptics. Also looked for are cimetidine (brand name Tagamet, a commonly prescribed antiulcer drug) and propranolol (brand name Inderal, used to treat various conditions, including high blood pressure and migraine headache). Obviously, not all drugs are tested in these two tox screens, but we must go with the information available. So far, we have no evidence for drug overdose.

Now, we must make sure he doesn't have a treatable problem such as infection (as opposed to an untreatable one, where we just support the patient and hope he gets better). As for his cardiac arrhythmia, it is clearly the result of some disorder and not the cause of his problems. His blood pressure is normal, and he is not in shock. It is his fever and confusion that make meningitis and brain abscess a major concern.

Meningitis, infection of the covering of the brain and spinal cord, is a medical emergency. It can kill quickly, particularly when caused by some types of bacteria. Brain abscess is a pocket of pus inside the brain and also a very serious problem; without surgical drainage of the pus, the patient will succumb.

Mr. Cartney was given a broad-spectrum antibiotic in the ED in case he did have meningitis, but good practice mandates a spinal tap so the spinal fluid can be cultured for infecting organisms. There are too many different causes of meningitis to rely on empiric antibiotic therapy.

But we have the same problem as the ED staff. Mr. Cartney cannot be safely positioned for a needle in his back. He is simply too combative. And his heartbeat is chaotic, a concern even though he has a decent blood pressure. We are stumped.

More test results return. His urine analysis is normal, no evidence for infection or diabetes. Kidney and liver function tests are normal, except for a low serum potassium, a key electrolyte in the body's cells. Why a low potassium? Did he overdose on some diuretic medication that depletes the body of potassium?

Here is this incredibly ill guy and no one is around who knows anything about him. Where does he live? With whom? Who brought him in?

And where is his family? Here is this incredibly ill guy and no one is around who knows anything about him. Where does he live? With whom? Who brought him in?

The information in the hospital's hastily-put-together chart is meaningless. Phone number 999-9999. Social security number 000-00-0000. (Who programs these computers anyway? Why not just "unknown," instead of a funny number?)

We call in a cardiology consultant. Dr. Sally Zingale is next door making rounds in the coronary care unit, and she comes right over. Yes, she says, the heart rhythm is chaotic. A weird pattern of atrial tachycardia and atrial premature beats. And no, there is no specific treatment, at least not right now. She specifically does not recommend any antiarrhythmic medication. "Find the underlying cause," she says. "I'll come back shortly."

"Thanks."

So here is the situation. This guy is sick, sicker by far than any other patient at the moment, and we have no idea why, and no medical history. We suspect a drug overdose or nervous system infection. The tox screen is negative, and he is too combative to do a spinal tap. What next?

Do not think this problem is handled in isolation. At any given moment, I am consulting with two or three other physicians, including residents in training, plus the patient's ICU nurse and anyone else who will listen. It is a weekend, so there aren't many people around, but I have help. What I don't have is a diagnosis.

Joyce Munson, one of the nurses, wonders: "Dr. Martin, what about rabies?"

"Rabies?"

"Yes. Don't people with rabies act like this guy?"

"You mean wild and delusional?"

"Yes, just like our Mr. Cartney."

"Have you ever seen a case of rabies?"

"No, but I've seen it in the movies."

"Could be, Joyce, but I seriously doubt it. It would be the first case ever in this hospital, and it seems so improbable. From what I've read, rabies victims maintain muscle spasms constantly, especially the facial muscles. Mr. Cartney's grimacing comes and goes. He looks more like some type of drug toxicity. In any case, we've got to look for something treatable, and rabies isn't treatable. But if we do the spinal tap, I'll save some fluid and check for the rabies virus if nothing else turns up.

"OK. Just a thought," she says.

Basically, I see two options. Watch

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him in his current condition, see what happens over the next 24 hours, and wait for some more test results (of thyroid function, for example; extremely overactive thyroid is a remote consideration). If some drug toxin in his body is being slowly excreted, he might improve over time. But if we miss a treatable infection, he could die for lack of the right antibiotics.

Alternatively, we can sedate and paralyze him with medication, then do a spinal tap and CT scan. This course of action will require connecting him to a breathing machine, since drug-induced paralysis will stop all spontaneous breathing.

What did this man take that we haven't measured or looked for? I work with this substance all the time, yet inexplicably do not think of it.

Death from meningitis for want of a spinal tap and proper fluid cultures is probably indefensible. With sedation we can control him, do the spinal tap, and maybe even figure out why his heart rhythm is so abnormal. On the other hand, intubation and artificial ventilation are not without hazard, and if there is a complication. . . .

Jed Warner is with me, a top-flight medical resident. I lean heavily on his judgment.

"Jed, what do you think we should do?"

"Knock him out and ventilate him." Jed is a direct kind of guy.

"Just like that? But his breathing is OK. Don't you think that's a bit drastic? I mean, he's a little wild, but he doesn't require artificial ventilation for any of the usual reasons. His lungs are normal."

"I agree, Dr. Martin, but you're not going to get anything done with him. We can't do a spinal tap or CT scan. You can't even check a blood pressure measurement without full leather restraints."

"What if we have trouble intubating him? What if we paralyze him and the tube comes out of his throat? (These things have happened.) What if . . ."

"Obviously, anything can happen, Dr. Martin, but I don't know where we're going to go with this guy. He could improve, but he's got a low potassium, a chaotic rhythm, so he could also get worse. With either meningitis or some poison in his body, he could stop breathing on his own. Then where are we?"

Jed is right. I just needed a little prodding to help make the right decision. We proceed to paralyze and intubate Mr. Cartney. We ask the nurse to inject two milligrams of Versed (a sedating drug), followed by two milligrams of Pavulon (a paralyzing drug). All the while, we monitor his heart rhythm. When Mr. Cartney is sufficiently relaxed, Jed proceeds with the intubation, which requires placing a foot-long plastic tube into Mr. Cartney's trachea.

As Jed struggles with inserting the narrow tube into Mr. Cartney's trachea, there is a sudden drop in blood pressure. The reason is readily apparent from the cardiac monitor.

Someone yells: "He's in vee fib!"

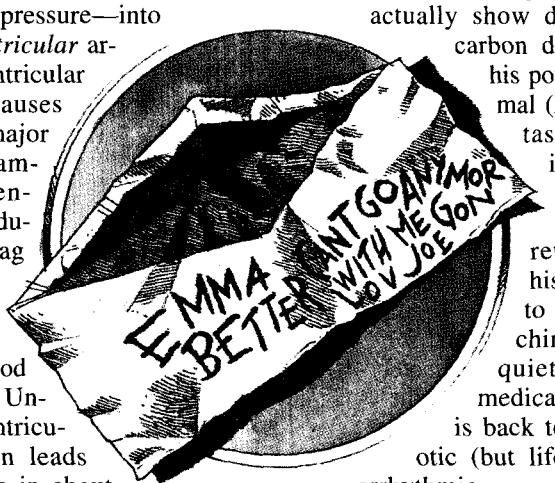
I stare at the monitor in utter dismay.

"Let's defibrillate. Is he being ventilated?"

"Yes, the tube's now in place."

"Stand back. Get ready."

Mr. Cartney now has the most chaotic of all cardiac rhythms, ventricular fibrillation. It is the rhythm of sudden death. We have changed a chaotic *atrial* arrhythmia—one that provides a decent blood pressure—into a chaotic *ventricular* arrhythmia. Ventricular fibrillation causes the heart's major pumping chambers (the ventricles) to undulate like a bag of worms. A heart in "vee fib" cannot pump any blood to the body. Uncorrected, ventricular fibrillation leads to brain death in about four minutes.



Joyce presses the buttons on the two defibrillator paddles straddling Mr. Cartney's chest. There is an audible "click" as 200 joules of energy surge through his heart. And I am thinking, *How did this happen? Are we going to lose him? Oh, please don't die.*

"OK, he's back in a supraventricular rhythm. I see narrow complexes. Do we have a blood pressure?"

"One twenty by palpation."

"Start lidocaine. Let's give him 100 mg."

Another minute passes. We all stare at the monitor.

"He's in vee fib again!"

"Shock him."

"How much?"

"The full 350."

"Stand back."

He is defibrillated again, this time at the maximum energy level, 350 joules. Meanwhile, one of the technicians continues to ventilate him through the endotracheal tube with an AMBU bag. Things are too unstable to rely on a mechanical ventilator right now.

"OK, he's back in some sort of regular rhythm. Call cardiology again." A minute passes, and Dr. Zingale is back in the room. We hand her a bunch of long rhythm strips from the cardiac monitor. They document the sequence of Mr. Cartney's alive-dead-alive-dead-alive cardiac rhythm.

"Vee fib," she says.

"I know, Sally. We shocked him out of it twice. I just gave him a bolus of lidocaine. Any other suggestions?"

"Do you have a blood gas and electrolytes?"

"They're cooking."

"Let's start him on a lidocaine drip at two milligrams a minute."

"OK."

Arterial blood gas results return and actually show decent oxygen and carbon dioxide levels. And his potassium is now normal (he has received potassium replacement in the IV fluids).

Ventricular fibrillation does not return. We connect his endotracheal tube to the breathing machine. By now he is quiet, paralyzed from medication, and his heart is back to its previous chaotic (but life-sustaining) atrial arrhythmia.

We wait a half hour to make sure he is stable, then do the spinal tap. The procedure goes without a hitch. The fluid is clear. No sign of spinal infection.

"Let's get him down for the CT scan."

A cadre of four people wheel Mr. Cartney and his machines to the CT scan suite in the basement. A half

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SEARCH FOR THE CURE CONTINUES

Medical sleuth Dr. Barry Marshall tracked down the cause of and cure for peptic ulcers. He may be the next best hope to unravel the mysteries of IBD.

by Cory SerVaas, M.D.

One of the most innovative young minds in medicine today was the honored guest at the Third Annual Saturday Evening Ball. By now, scientists the world over are applauding Dr. Barry Marshall for finding the cause of and, better yet, the cure for gastric ulcers.

Dr. Marshall's discovery that the bacterium *Helicobacter pylori* causes gastritis and gastric ulcers has had a dramatic impact on millions of lives. By taking a prescription of Flagyl, tetracycline, and Pepto-Bismol, more than 80 percent of ulcer patients are cured and freed from a lifetime of taking Tagamet and Zantac. This is great news for the many sufferers of gastritis and stomach ulcers.

Sufferers like Indiana Congressman Dan Burton are eternally grateful to Dr. Marshall for putting an end to years of pain. Speaking at the ball, Dan Burton told how his stomach condition became so severe that eventually he couldn't sleep—and he had tried all the antacid drugs, such as Zantac and Axid.

"Then one of my friends told me about this young whippersnapper scientist named Dr. Barry Marshall," Burton said. At first the regimen sounded a little strange, but Burton recalled that at this point he was willing to try anything. He flew to Dr. Marshall's office and was found to have the *Helicobacter pylori*. After a regimen of antibiotics and Pepto-Bismol, he is now cured of his painful stomach inflammation. "I eat everything now, and I feel great!" Burton said. His audience burst into applause.

"I'd like Dr. Marshall to get the Nobel Prize for scientific research, and if I have anything to do with it, he'll get it one of these days. . . . I think this man has done a great deal for humanity," Burton said. "Ultimately, he will be perceived as one of the great scientific leaders of our time."

Now that Dr. Marshall has solved the riddle of peptic ulcers, will he turn his attention to other mysterious ailments in his field of gastroenterology? He's being encouraged to tackle Crohn's and ulcerative colitis next.

"Ultimately, we may find that there are simple things—perhaps an infection or something that could be the cause of Crohn's and colitis," Dr. Marshall said. "Obviously, because we don't

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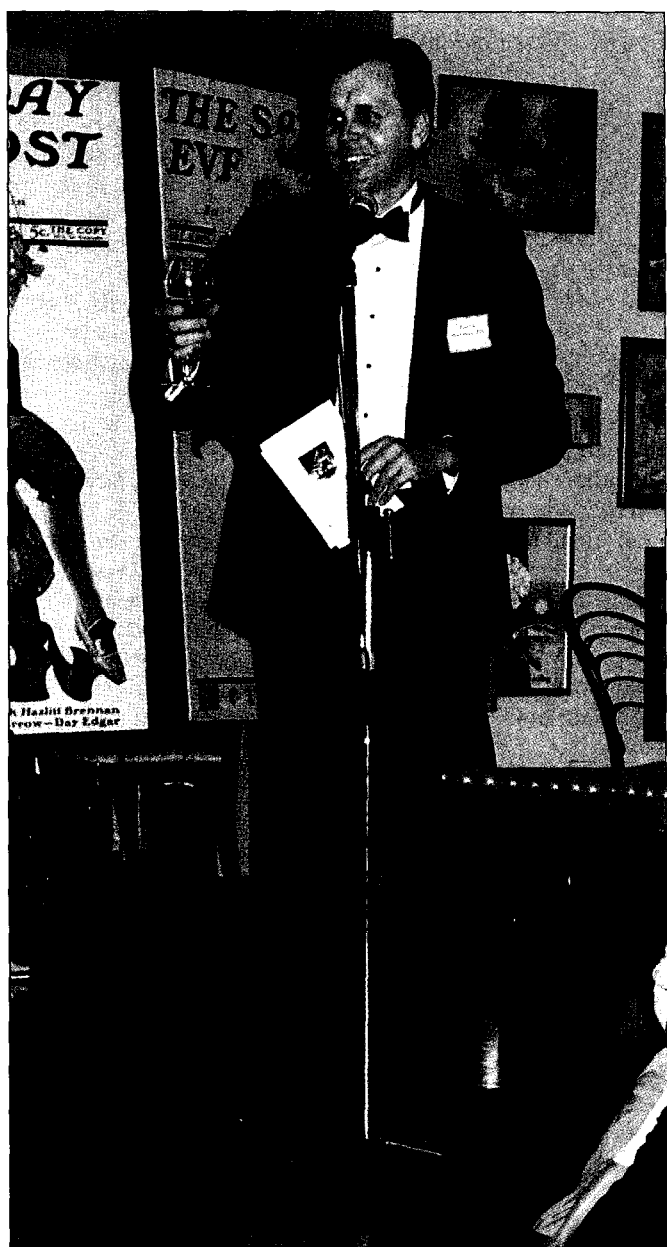
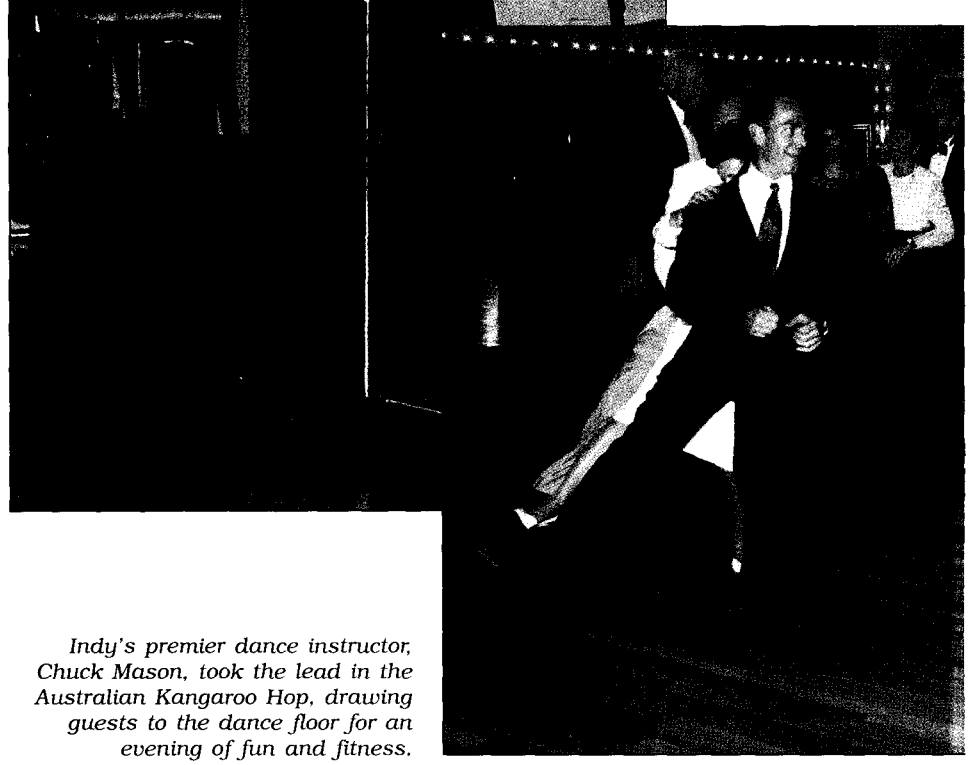


Dr. Barry Marshall was the guest of honor at the Third Annual Saturday Evening Ball. Established to honor the memory of the beautiful and talented Charlene Comstock, who lost her life to ulcerative colitis, the Charlene Comstock Memorial Fund presented Dr. Marshall with a check for $5,000 to continue his research into digestive diseases.



Indy's premier dance instructor, Chuck Mason, took the lead in the Australian Kangaroo Hop, drawing guests to the dance floor for an evening of fun and fitness.

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Indiana Congressman Dan Burton wants to nominate Dr. Marshall for the Nobel Prize for his contributions to humanity. Burton himself suffered from painful, chronic gastritis and was promptly cured using Marshall's revolutionary regimen of antibiotics and Pepto-Bismol.

Greg Comstock and his parents tell of Charlene's death from ulcerative colitis. (Right) Barry isn't studying the Rockwell paintings at the Post; he's sneaking a kiss from Adrienne, his lovely wife of 21 years.

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AN ODYSSEY OF HOPE AND CHRONIC ILLNESS

When a long-suffering and enlightened IBD patient tried the Australian "ulcer cure" and found herself without symptoms for eight months, she called Dr. Barry Marshall, who faxed the good news to the Post.

by Mary Stolberg, Ph.D.

Editor's note: Just as we went to press, a fax arrived from Australia with news of Dr. Mary Stolberg, who suffered for 13 years with IBD and had, in desperation, tried Barry Marshall's regimen for treating stomach ulcers.

To her astonishment, her ever-present, painful Crohn's colitis symptoms promptly disappeared. Now, after eight months of complete remission, she decided to go public with her good fortune. We are publishing her story in the hope it may give rise to more experimentation and a better life for IBD sufferers.

When I was 24, doctors told me I had cancer.

I had just returned from my first trip overseas. I was four years into a promising career as a newspaper reporter. My future seemed bright. Then the word "cancer" cast a pall over everything.

It turned out that the doctors were wrong. The suspected cancerous tumor was a harmless polyp in my colon—a sign of inflammatory bowel disease (IBD) rather than a fatal illness. Had I understood the nature of my reprieve, I might have preferred a cancer that could have been easily excised by a surgeon's scalpel and better understood by my family and friends.

Doctors told me I had Crohn's disease, one of the many recurring, debilitating sicknesses loosely labeled as chronic illnesses. That catchall phrase includes maladies as diverse as epilepsy, diabetes, and chronic fatigue syndrome.

There are no exact figures as to how many people are chronically ill in the United States. The National Health Council, a nonprofit association of national health organizations based in Washington, D.C., estimates that there are 49 million Americans who suffer both disabilities and

Dr. Mary Stolberg, as she appeared at her graduation for her Ph.D. degree. She apologized to us for the swollen cheeks that result from heavy doses of the prednisone she was required to take for her painful Crohn's colitis.

chronic illnesses. Although the symptoms vary, there is a numbing sameness to the way in which chronic illnesses and disabilities take a mental and physical toll on their victims.

In the end, my 13-year battle is a story fraught with miracles both large and small. Earlier this year, I persuaded my doctor to try an experimental course of treatment. Within two weeks, the medicine alleviated symptoms that stubbornly had resisted standard treatments for years. If my "fix" proves true, it could signal hope for some of the two million people now diagnosed with Crohn's disease and ulcerative colitis.

I also have experienced less dramatic miracles—the subtle and profound changes that everyone who faces any kind of chronic disease can discover. By limiting my outer life, illness provided me with an inner peace, strength, and wisdom that came after years of struggling with denial, anger, isolation, and self-doubts.

Only now, when I am on the winning side of good health, do I fully appreciate the gray areas of disease that medicine cannot reach and our society does not understand.

Our knowledge of medicine revolves around a few key illnesses. Cancer usually can be treated by chemotherapy, radiation, and surgery —or it is fatal. Alzheimer's and AIDS also carry definitive death sentences. The limits of medical treatment in such cases are clear-cut, and the patient's suffering merits social acknowledgment and compassion.

By comparison, chronic illnesses fall through the cracks between good health and certain death. Although doctors and their patients recognize the physical causes of illness, it is often hard for them to take that knowledge to heart. Doctors used to curing patients, or having them die, are frustrated by the intractability of incurable, but nonfatal, diseases. Patients are worn down by debilitating symptoms and limited understanding.

Take chronic fatigue syndrome (CFS). Its vague name reveals just how little doctors know about this illness that renders its victims weak for many years. Its nickname, the "yuppie disease," points up the social stigma often attached to chronic illnesses. Some misunderstood diseases and their sufferers wait years for full medical recognition and social acceptability.

Psychiatrists, who initially studied Crohn's disease, believed that patients had negative personality traits. These patients supposedly brought on their own sicknesses through compulsive behavior and their inability to express anger. Only later did doctors realize that they had confused cause and effect. Studies showed that most

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patients suffered mental anguish only after Crohn's disease had weakened their bodies and limited their lives.

Unfortunately, many patients suffering with chronic illness internalize psychological tags and outside criticism because we live in a society where good health is the norm. Despite reassurances from my doctors, I initially wanted to believe that stress caused my symptoms. Unfortunately, I found a psychologist who was willing to feed this fantasy of a painless cure.

Quack healers are as dangerous as the other extreme—doctors who deny the relationship between mind and body. Sickness has taught me the subtlety of that complex interaction. I do not believe that yoga and prayer cure Crohn's disease, but I know that both helped me feel better. Deep breathing and mental exercises went a long way toward helping me to diffuse the excruciating pain caused by days of colon cramping. On nights when I was in too much pain to sleep, I learned that prayer brought a peace that only came when I felt completely helpless.

Despite exciting advances, doctors still have a poor understanding of Crohn's and many other chronic illnesses. Researchers rarely know the causes of these diseases. As a result, they have no cures to offer. The most plausible theory for many of these illnesses is that they result from breakdowns in the body's immune system. In healthy people, the immune system fights infections and then shuts off when the battle is won. But in autoimmune diseases, the system never stops. Instead, it begins attacking healthy tissue.

In Crohn's and other inflammatory bowel diseases, this war often takes place in the intestines. The results are bleeding ulcers that prompt the body to release an oozing phlegm of antibodies. The blood and phlegm mix with other wastes to form diarrhea that the colon evacuates with painful cramping. Because of the ongoing infection, patients have recurring low-grade fevers and difficulty absorbing essential nutrients normally processed by the intestines.

Inflammatory bowel diseases vary according to their severity, the part of the bowels they attack, and the efficacy of surgery as a treatment, among other things. The mildest form of disease is proctitis—an inflammation of the lower colon near the rectum. The worst form is Crohn's disease, which normally attacks large sections of the bowel and, unlike colitis and proctitis, cannot be cured by surgically removing damaged tissue.

My case was perplexing because I had symptoms of both proctitis and Crohn's disease. My problems were always limited to the lower eight inches of my colon. That made it easy for doctors to dismiss my ailments as proctitis. Biopsies also supported that diagnosis. As the years wore on, my symptoms worsened. I did not respond well to the traditional medicines—sulfa drugs and steroids. I kept getting sicker, spending months in bed, unable to eat solid food or to work. I ran fevers for months on end and was so weak that I had to give up my favorite activities of swimming and hiking. Even simple things, such as going to the grocery store, proved difficult. Still, doctors kept insisting that I had only a mild illness.

I now realize that impressive-sounding diagnoses can be the signposts of medical ignorance. Diagnoses are a lot like bulky cloaks. They provide a certain degree of warmth, but they convey only the vaguest sense of what lies underneath.

As a friend of mine struggling with the dilemma of whether to put her mother in a nursing home said, "The doctors say she has osteoporosis. What does that really mean? It says nothing about her problems or how she and I cope with everyday life. It's just an empty word." Perhaps the British have a more appropriate label: they call osteoporosis "skeletal failure."

Because mine was never a classic textbook case, it took doctors eight frustrating years to decide I had some form of Crohn's disease. The search for a proper diagnosis showed the degree to which medical identifications carry their own logic. Once doctors decided I had proctitis, they continued to heed the scientific tag rather than my description of my ailments.

I understand why both doctors and their patients latch onto impressive scientific tags. It stems from the hope that once doctors classify and name symptoms, they can then deliver a cure. I often indulged in this kind of fantastic thinking. I believed when

One of the most innovative men in the health insurance business is Pat Rooney (center), CEO of the Golden Rule Insurance Company. He met his match with Australian Barry Marshall, who enjoyed meeting Mrs. Patricia Rooney.

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doctors finally figured out what to call my ailments, I would magically find myself on the path to wellness.

During my initial dealings with doctors, I trusted their wisdom. When my first physician wrongly diagnosed me with cancer, I dismissed his error as a mistake of inexperienced earnestness. When doctors could not diagnose my problems, I dismissed their failure, believing in the complexities of my own case.

It took five years for my faith to falter. I had left my job and entered a demanding Ph.D. program. Like many patients with chronic illnesses, I was unable to get adequate medical insurance after I moved. As my bills mounted, a local doctor agreed to treat me at reduced rates. I did not realize that cheap fees translated into less care until I became seriously ill and he opted to handle my case by phone. My weight dropped more than 30 pounds in three weeks, my fever never dropped below 102°, and I bled constantly.

Dr. John Pittman, prominent cardiac surgeon, is interested in Dr. Marshall's theories that Helicobacter pylori *bacterial infections in the stomach might also play a role in cardiovascular symptoms.*

Through his nurse, the doctor continued to assure me that I was not that sick, even though I could only eat crushed ice, juice, and broth. One morning at 5:00 a.m., I awoke in agony, went to the toilet, and felt a huge release and a long gush of blood. As my doctor examined me, he gasped, then said, "I've never seen anything that looked this bad in the 12 years I've been in practice." From that moment, I realized that doctors are limited, and I had to become the most ardent advocate for my own health.

I wrote pharmaceutical companies to learn about new medicines that might work for me. I read books explaining nutrition and symptoms. Most important, I gleaned new hope by learning how other patients had triumphed over symptoms similar to mine.

My own situation seemed bleak. I was sick all the time but had no medical insurance. I was too weak to simultaneously hold a job and research my dissertation. It took all of my energy to spend eight hours every day in libraries and archives. My savings and grants were running low. Friends offered to provide free housing, and I moved to Houston to write my dissertation.

There, I finally found a skilled gastroenterologist, Dr. Philip Bentlif, who appreciated the ambiguity of my case. The fact that my illness did not fit traditional labels did not bother Dr. Bentlif. He said I had Crohn's colitis and began treating my symptoms. I was relieved to find a doctor who heeded my voice, and I slowly began to improve.

After a year, I took a job in the mountains of North Carolina. My illness had fallen into a tiresome and depressing pattern. I was never quite sick and never quite well. I had exhausted the traditional medicines, and the only ones that still seemed to hold out hope were immunosuppressives—pharmaceutical powerhouses that shut down the body's protective system. Immunosuppressives pose a high-risk solution because they leave patients open to other infections.

Last fall, I read about the work of Dr. Barry Marshall, who was then an associate professor of medicine at the University of Virginia. For ten years, Marshall battled to win recognition for his theory that a bacterium, *Helicobacter pylori* (*H. pylori* for short) caused peptic ulcers.

Marshall's theory challenged entrenched medical wisdom. Traditional approaches called for treating ulcer symptoms with long and expensive courses of medicine. By contrast, Marshall's treatment consisted of a two-week course of antibiotics to kill off the *H. pylori*, which then eliminated the symptoms.

A magazine profile of how Marshall reached his conclusions struck a chord with me. *H. pylori* is commonly found in poorer nations; I had first contracted my illness after a bout of dysentery in India. *H. pylori* reacted well to antibiotics; the only drug that had ever worked well for me was a powerful antibiotic, metronidazole.

With article in hand, I went to my local internist. Robert Griffith is an unusual doctor; he came to medicine later in life and chose to settle in my small town, rather than pursue a more lucrative practice in a larger city. During his residency, Griffith had studied with Marshall at the University of Virginia. He expressed skepticism that a cure for stomach ulcers could provide any relief for colon complaints. Still, he was open-minded enough to call Marshall and discuss my case. Neither believed it would help, but neither thought it would hurt.

Testing for *H. pylori* is an arduous process long distance, and I already had begun taking Marshall's recommended cure for ulcers by the time my test results came back negative. That cross in communication proved to be a blessing. Although I did not have *H. pylori*, the broad spectrum antibiotic, Biaxin, had worked. After years of continuous bleeding, cramping, diarrhea, and fevers, I was suddenly free of symptoms.

Initially, I did not tell anyone what had happened, even my doctors. I worried that my "cure" was little more than proof of the placebo effect that occurs when patients succumb to the power of suggestion. I superstitiously feared that telling my story would jinx my good health, prompting

continued on page 69

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"GOD MUST BE DUTCH"

His life might have ended on September 17, 1944, had it not been for the selfless act of a fearless young Dutch partisan.

by Joe Curreri

As we get older, we keep active, live for today, hope for tomorrow, but memories spur us on. The highlight of my life came ten years ago when I flew back to Holland for a reunion with the man who saved my life in World War II.

Anxiety mounted as the plane neared my destination of Eersel, Holland. Would I recognize my lifelong friend and savior, Adrian Goosens? What would I say? How was I to act?

My mind flashed back some 40 years to another flight over Holland during World War II, September 17, 1944. It was the greatest airborne military operation in history—The Battle of Arnhem. About 35,000 Allied paratroopers were dropped behind Nazi lines in Holland to liberate that country. At the same time, British ground forces would advance from Belgium for a linkup. Unfortunately, the Allies underestimated the strength of the German forces. By the time British soldiers arrived—five days late—thousands of Allied troops were killed, captured, or wounded.

Technical Sergeant Joe Curreri served in the Army Air Corps from 1942 to 1945 and was crew chief of a C-47 when it was downed by enemy antiaircraft.

All that remained of the author's plane, the "Clay Pigeon," after it was shot down over Holland by Nazi antiaircraft fire during the Battle of Arnhem.

I was crew chief of our C-47, prophetically named "Clay Pigeon." We carried a crew of four, as well as 18 paratroopers we were to drop near Eindhoven, but we never made it. An enemy antiaircraft shell made a direct hit in the middle of our plane's fuselage. In seconds, the aircraft was blazing; we bailed out.

With my heart thumping, I landed in an open field and ran for the woods. Alone and unarmed, I felt as helpless as a frightened bird that had lost its wings. Suddenly, a young Dutch civilian came from nowhere and shouted, "*Américain? Vien avec moi!*" With my rusty high school French, I understood him to say, "Follow me!" Was he friend or foe? I had no choice; I had to trust him.

He was a friend who the Germans would have shot for helping an enemy soldier. But Adrian Goosens risked the consequences and hid me in his home until Nazi soldiers began searching every house. He then hid me in the woods, where I was reunited with my crew members. I was stunned to see both pilots alive. They had gone down with the plane and miraculously survived with broken bones, cuts, and burns. Members of the Dutch Underground had dragged them out of the burning craft.

Over the following days, diminutive, wiry Adrian Goosens scouted the area and warned us when the enemy was near. Once, about 30 German soldiers came within 20 yards of our hiding place and built a machine gun nest. But thanks to Adrian's warning, we dug foxholes and camouflaged them with brush and branches.

For three hours, we lay still in our foxholes, waiting to die. I prayed—boy, did I pray! I thought, *How do you explain to a mother that her son died for his country*? Fortunately, the Nazis moved on.

We waited for the advancing British Army. For five anxious days and

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(Right) Goosens took this picture on September 17, 1944, of Curreri (left) with injured "Clay Pigeon" pilot and copilot hiding in the Dutch woods. (Below) Goosens and a local farmer (top row, right) with unidentified Allied soldiers. The author is at bottom left.

sleepless nights, we hid in the woods. Adrian and a nearby farmer brought food to us. I marveled at the Underground fighters. *Great men and brave*, I thought to myself. *God must be Dutch*. Even the local priest joined the Underground.

When the British finally arrived, Adrian directed them to our hiding place, where we were rescued. Thank God for our freedom and for people like Adrian who risked their lives for us.

After the war, I returned to my beloved Philadelphia to resume my business career. But I never forgot the heroic deeds of the Dutch Underground, especially my friend, Adrian Goosens. Through the years, we kept in touch.

In 1953, a devastating flood hit Holland. The people were in need of food, clothing, and medicine. Reacting swiftly, I posted a sign in the window of my business: "We Will Collect Any Old Clothing, Shoes and Blankets for Holland's Flood Relief. The Dutch Underground Helped Us During The War. It's Our Turn Now." The response was overwhelming. I collected two truckloads of needed items and sent it through the Dutch consulate to Holland.

With occasional exchange of overseas letters, Adrian and I kept up with each other. We both married and had two children. We both had heart attacks, recovered, and retired.

As the years passed, my one great desire was to meet face-to-face, one more time, the man who saved my life. Financial problems made this dream seem impossible. Then one day, I received a phone call: "This is Adrian Goosens from Holland calling!"

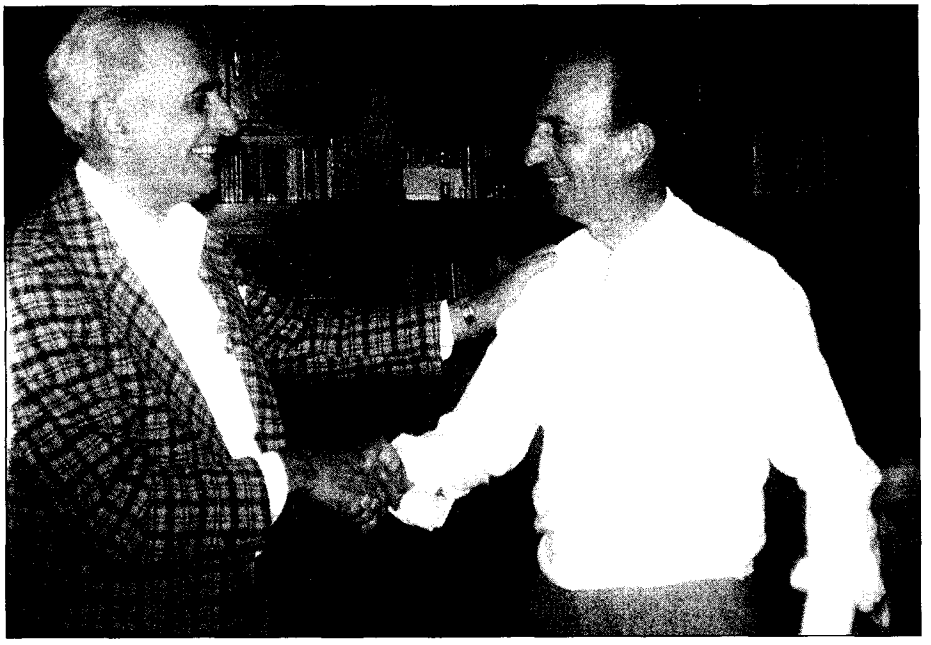
I almost dropped the phone. "Adrian?" I gasped. "It can't be!" He had learned to speak English and invited me to come and visit him for ten days. He told me the airline tickets were on the way. I was so overwhelmed, tears rushed down my face.

In preparation for my trip, I had to do something special, meaningful. When I told then-Mayor William J. Green III of Philadelphia my incredible story, he drew up an official greeting to Adrian Goosens and his comrades, thanking them for the help they gave American soldiers during the war years. The mayor also included a miniature reproduction of the Liberty Bell with an engraved plaque.

The White House also responded to my request with a beautiful color portrait of the president with the words: "To Adrian Goosens, with thanks and greetings from the American people." It was signed "Ronald Reagan." This time, I'd fly in style with cameras and gifts instead of combat troops.

As the flight made its approach for landing, the moment had arrived. There he stood, now 68, waiting at the Eersel boarding ramp. No words can describe that moment; we clasped hands and embraced. The tears flowed freely. For ten unforgettable days, we remembered and retraced our dreadful experiences in the woods 40 years earlier. When I gave him the gifts, he only replied, "It was my duty."

Adrian introduced me to the beauty of the land and the warmth of the Dutch people. As we said good-bye again at the airport, I looked back at Adrian Goosens, who stood all of five feet, six inches. But to me, he looked ten feet tall!



Forty years after the fateful Battle of Arnhem, a grateful Curreri clasps hands with his rescuer at Adrian Goosens' home in the Netherlands.

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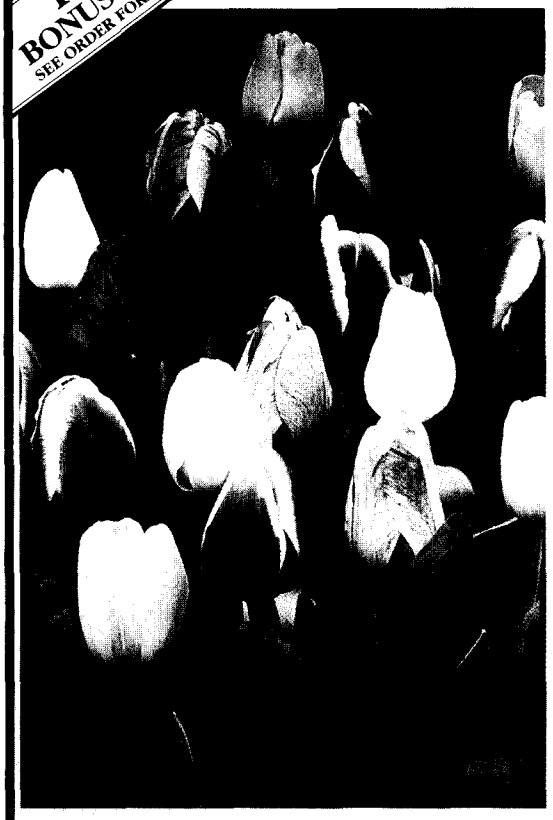

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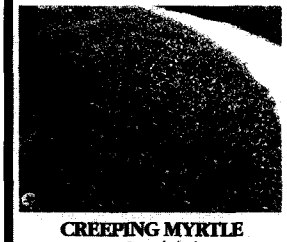

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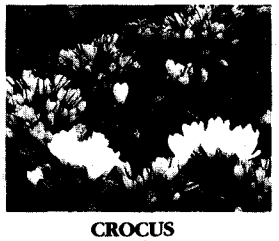

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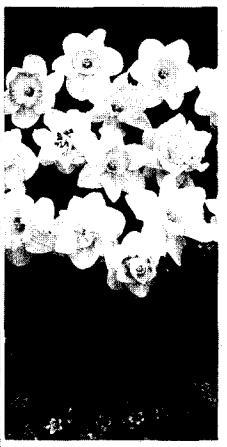

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Search For the Cure Continues

continued from page 58

know the causes of these diseases after so many years, I think we've missed something. Perhaps we should put a new angle on this."

Anyone with gastritis or stomach ulcers should know that there is a breath test for *H. pylori*. The breath test measures the presence of the bacteria in the stomach by detecting the enzyme urease. The test involves consuming a urea compound and then blowing into a collection bag; next, the sample is analyzed for the bacteria at a lab. Anyone interested in obtaining further information about the investigational breath test and complete details about Dr. Marshall's work can contact the International Research Foundation for Helicobacter and Intestinal Immunology, P.O. Box 7965, Charlottesville, VA 22906-7965, or call 804-977-1594.

The foundation has a packet of materials about Dr. Marshall's research. It is written to inform physicians about the results of various combinations of antibiotics that have been successful in treating *Helicobacter pylori*. The updated information is mailed to the patient, who can then take it to his or her physician. Anyone wishing to make a donation to the foundation can do so by mailing it to the address listed above.

The July 16, 1994, British medical journal *Lancet* published an interesting paper about *Helicobacter pylori* and the heart. Excerpts from the report follow:

"The list of traditionally noncommunicable diseases that have been linked to the long-term effects of infectious agents continues to expand. *Helicobacter pylori* is responsible for some of that expansion, having been implicated in gastritis, peptic ulcer disease, gastric cancer, and gastric lymphoma. Now a new association has been suggested, with coronary heart disease."

In a case-controlled study, men attending a cardiology clinic in a London teaching hospital were compared with men in the same age group attending a general practice screening clinic. They reported, "The crude odds ratio for coronary artery disease associated with seropositivity (*Helicobacter pylori*) was 2.28. This fell to 1.90 after adjustment for age, cardiovascular risk factors, and socioeconomic status."

Because age, socioeconomic status, and ethnicity are all associated with *H. pylori* infection *and* with coronary heart disease, the researchers knew that this could confound the association. It is difficult to separate out *H. pylori* as an independent risk factor in its own right. Control for socioeconomic factors is difficult. "If further work does confirm the association, it would be interesting to include coronary heart disease along with gastric cancer as long-term outcome measures in any trial of *H. pylori* treatment," the author stated. The work was submitted by Dr. Judith R. Glynn of the Department of Epidemiology and Population Sciences, London School of Hygiene and Tropical Medicine, U.K.

• • •

In the next issue of the *Post*, we will carry the complete results of the Inflammatory Bowel Disease Survey with our readers' responses. Georgia Ratliff, our computer analyst, informs us that many of our digestive disease sufferers report doing better when they eat rice, potatoes, and pasta—and

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worse when they consume roughage, spicy foods, and dairy products.

The survey also reveals that IBD sufferers have a higher incidence of relatives with celiac sprue (see page 88 for more information about celiac sprue).

An Odyssey of Hope

continued from page 62

another relapse. Furthermore, I did not want to publicize my experience and give other Crohn's sufferers false hope. Now that eight months have passed, I believe my long battle with chronic illness has ended.

I called Barry Marshall, who has left the University of Virginia to set up the International Research Foundation for Helicobacter Pylori and Intestinal Immunology in Charlottesville, Virginia. Marshall knew of only one case besides mine in which his course of antibiotic treatment cured inflammatory bowel disease. Currently, there is no way to keep track of such cases—a problem Marshall hopes to correct with his foundation.

My case did not surprise Dr. Marshall. If his theories are correct, then the body hosts many bacteria in the colon besides the ones that researchers have isolated. Once doctors identify some of these disease agents, Marshall believes it will be possible to eradicate many, if not all, inflammatory bowel diseases.

Marshall cites the encouraging work of his colleague, Dr. Thomas Borody of Sydney, Australia, who has been experimenting with bacterial transplants. Dr. Borody's treatment consists of cleansing diseased bowels of all bacteria, then transplanting new bacteria from a healthy person. Like the antibiotics I was on, this method provides a broad-brush way of helping patients until doctors can target individual disease-causing bacteria.

The search to find those bacteria will consist of sophisticated detective work. When the body senses a foreign substance, the immune system, acting through lymphocyte cells, creates a tailor-made antibody. As Marshall explains, "Within molecular biology, we are developing various high-tech ways of looking at antibodies; conceivably, we will be able to remove a lymphocyte and work out its DNA to see what it is directed toward. Ultimately, we'll be able to identify new bacteria."

Dr. Marshall provided the scientific explanation, but that provided few insights on how to adjust to my newfound health. Chronic illness has changed my thinking and restricted my life. After eight months, I still find myself behaving as if I am sick. Recently, I went to visit new neighbors who live a mile down my road. I reached for my car keys, then realized I could walk. When I take a trip, I have to remind myself to pack only one set of clothes; I no longer have to take extra pants and skirts in case of accidents. I now face the glorious prospect of integrating my new insights as I try to pick up where I left off 13 years ago.

Last month, a friend of a friend told me about her battle with chronic fatigue syndrome. Hers was a chilling tale of loneliness and frustration. Her husband urged her to keep her illness secret so it would not affect his chances of climbing up the corporate

continued on page 71

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An Odyssey of Hope

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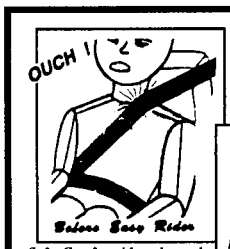
ladder. Her friends had stopped calling because she could not spend enough time with them. To my own surprise, I found myself saying that having a chronic illness had been one of the best experiences of my life.

After we hung up, I wondered what had prompted me to think of sickness as a benefit. By nature, I am impatient, stubborn, ambitious, and a workaholic. Obviously, illness has not changed my basic character. But it did force me to become more patient, to appreciate the smaller joys in life, and to pay more attention to my body and surroundings. Because I have "lost" so many years, I now see time, ambition, and work differently. I have become more spiritual and more sympathetic to other peoples' weaknesses and failings.

I was lucky. I found good doctors who kept me going without the drastic step of surgically removing my colon. I had supportive relatives and friends who tried to understand my frustration and fears. With their help, I never lost hope—which is ultimately any patient's best tool to combat chronic illness. ✱

About the author: Dr. Mary Stolberg is a graduate of the University of Chicago and received her doctorate from the University of Virginia. She was formerly a newspaper reporter for the Pittsburgh Press, writes books, and is resuming her promising career, feeling sure she is cured. Only her puffy cheeks remain to remind her of unhappier, earlier days on prednisone.



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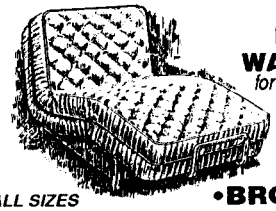

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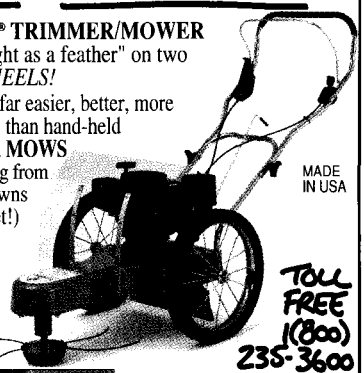

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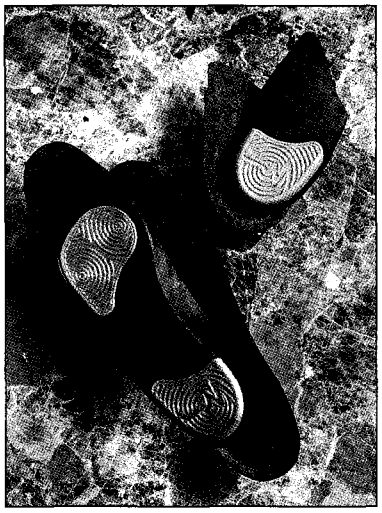

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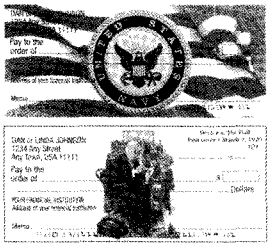

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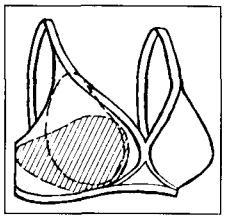

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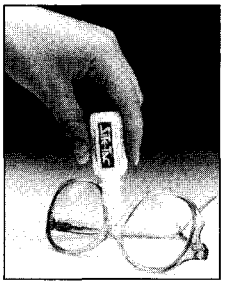

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hour later, we have the scan results. Normal. No brain abscess.

It is now two in the afternoon, some six hours after Mr. Cartney came to our ED. He is back in his room at the ICU, and I have long since given up my afternoon plans. I sit staring at a mass of lab data, and at his cardiac monitor. The answer is staring back at me, but I don't see it. It is too obvious, I suppose, but there it is. Chaotic heart rhythm, delirious patient, low potassium level, no apparent infection. What did this man take that we haven't measured or looked for? I work with this substance all the time, yet inexplicably do not think of it until . . .

"Dr. Martin, his family's in the waiting room."

"What? Mr. Cartney's family?"

"Yes, they want to know if they can see him."

"See him? You bet. I'm going out to talk to them."

Jed and I walk out to the waiting room. I am more curious than I can remember to meet a patient's family.

In the waiting room are two men and a woman. The men, like Mr. Cartney, appear dirty and disheveled. They have grease in their hair, on their clothes. Perhaps, I think, they just finished working in a gas station. And they smell of cigarettes. But their appearance is not important. I need *information*.

I introduce myself and Jed. One of the men speaks.

"We're Emma's brothers," he says, and points to the other man, who doesn't speak but gives a polite nod. "My name's Billy Echol. I brought him in. I was double parked, so I told the girl I got to go get Emma."

"Why didn't you return right away? We really have no idea what's happened to Mr. Cartney. Why didn't you at least call us?" I don't know why I'm giving this guy the third degree, but I am annoyed and can't help myself. My questioning doesn't faze him.

"No phone, doc. And we had some car trouble. It's fixed now."

I am poised to ask numerous questions about Mr. Cartney. When did he get sick, what were his initial symptoms, is there any history of animal bites, any history of drug overdose, do they know if he took any pills, etc.? I

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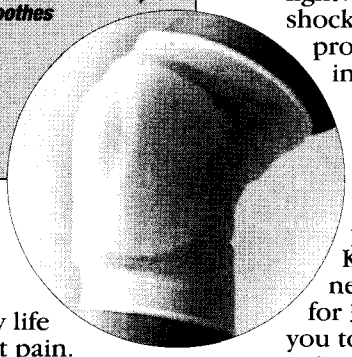

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am expecting a difficult-to-get history with many blind alleys, but I am wrong. His brother-in-law heads me off.

"We found this in his room." He hands me a note.

A note from Joe Cartney. *A suicide note!* In block letters and crudely written on an envelope:

EMMA. CANT GO ON ANYMOR.
BETTER WITH ME GON.
LOV, JOE

"Then he took something!" I am excited. We are getting close to an answer. "What did he take? Do you know what he took?"

Billy has that information also. He hands me a plastic pill bottle. "This here's Emma's asthma pills. It's empty. She says it was full yesterday."

I stare at the label. It is the missing piece to this puzzle:

Emma Cartney
Theo-Dur 300 mg, #60
Take 1 tablet twice
a day with meals.

Theo-Dur. *Theophylline*. Of course! It all fits! He overdosed on theophylline, a common asthma drug.

"Jed, let's get a stat theophylline level on Mr. Cartney. Call the lab and tell them to please run it right away. After that, take Mrs. Cartney and her brothers in to see him. I'm going to call the kidney dialysis service."

I return to the ICU and place a call to Dr. Richard Malcolm, the physician on weekend call for the kidney dialysis service. If Mr. Cartney took 60 tablets of Theo-Dur, he may need hemoperfusion, a sophisticated technique that can wash out theophylline from the body by passing the patient's blood over a special column of charcoal. The charcoal column absorbs theophylline, and the cleansed blood is then returned to the patient. It is a sophisticated and rarely performed procedure. Most overdose patients don't need hemoperfusion, and it is only effective for some types of drugs. Theophylline is one of them.

Mild toxicity from theophylline is actually fairly common. It happens to patients who take the drug as prescribed but, for one reason or another, build up a higher-than-expected level; just stopping the drug is all the treatment needed.

Even people who intentionally overdose with a theophylline preparation rarely need hemoperfusion. Usually the drug dissipates naturally in the body and clinical improvement rapidly follows. But there is a limit to how much theophylline the body can tolerate. Mr. Cartney's case turns out to be the mother of all theophylline overdoses.

"This one's 100 percent cable-ready."

"I can't do hemoperfusion without a drug level."

"Richard, the theophylline level's being run now. This guy has almost died twice on us already. The whole thing fits. Potassium goes down in theophylline overdoses. His cardiac disturbance is classic for theophylline toxicity. And his delirium fits the picture also."

"Why didn't you draw the level earlier?"

"We didn't think of it. It's not part of the routine tox screen, and we had absolutely no history. We're all smart in retrospect."

"When will it [the drug level] be back?" It is now 2:30.

"About 3:00, the lab said."

"Well, we're ready to go," Dr. Malcolm says. "My technician is warming up the equipment. If it is theophylline, how high do you think his level is? Do we know when he took the tablets?"

"No, his wife found him puking this morning. The way he's behaving, I'd say he swallowed the whole bottle about midnight. The pills were probably all dissolved into his blood by the time they pumped out his stomach this morning."

"So what do you think his level is?" Dr. Malcolm asked. The question was like, "So what do you think the final score will be?" I took up the challenge and called over to Jed, who was writing some notes.

"Hey, Jed, what do you think Mr. Cartney's theophylline level is?"

The therapeutic theophylline level—the amount in the blood that is supposed to help asthma patients when they take the pills as prescribed—is between 5 and 15 milligrams per liter, written "5-15 mg/L." Patients tend to get sick with nausea, diarrhea, or palpitations when the level exceeds 20. Above 30, and a patient will likely be admitted to the hospital; above 40, to the intensive care unit. Most experts recommend hemoperfusion when the level exceeds 80. The highest level I have personally seen to this point is 84, and that patient had seizures.

"Oh," said Jed, "considering

continued on page 77

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ARTHRITIS PAIN RELIEF PROVEN EFFECTIVE IN CLINICAL STUDIES.

Au Pharmaceuticals, Inc., a Texas based company, has continued to achieve significant recognition and praise for its highly effective pain relief formulation AURUM Analgesic Lotion.

Dr. Christopher Burda, M.D., a leading rheumatologist and arthritis researcher, reports a 93% success rate in relief of pain among his patients involved in an open-label, clinical study. These patients had pain associated with arthritis, bursitis, tendinitis and other similar disorders. Their pain relief ranged from good to complete relief. The over-the-counter drug that was used in the study was AURUM Analgesic Lotion.

Because AURUM is topically applied and is not taken internally, there are no gastrointestinal side effects such as those associated with some pills and tablets.

As Dr. Burda stated, "AURUM is a most valuable therapeutic modality without systemic side effects in the management and treatment of various musculoskeletal disorders."

Another leading rheumatologist, Dr. William G. Brelsford, M.D., conducted a double blind study at a leading research center and said "AURUM can provide a significant level of pain relief for the discomfort of bursitis, tendinitis, arthritis and similar soft tissue injuries and disorders."

Dr. Joseph Kahn, Ph.D., P.T. a leading physiotherapist and author of the well known textbook "Principles and Practice of Electrotherapy," reports that all of his patients who used AURUM received temporary relief from pain. He said, "AURUM is a significant adjunct in the treatment of arthritis."

Dr. Thomas Romano, Ph.D. and Dr. John Stiller, M.D. performed a clinical test of AURUM for Fibromyalgia Syndrome (FS) patients. FS is a soft tissue rheumatism condition characterized by widespread musculoskeletal pain, tender points and nonrestorative sleep. They stated, "Results clearly indicate that AURUM is helpful in relieving pain in patients with FS."

AURUM is a patented drug and is listed in the "Physicians' Desk Reference for Non Prescription Drugs." AURUM is formulated with 3 active pain relievers and 18 other high quality ingredients. AURUM contains Methyl Salicylate and 24 Karat Gold, consult physician if allergic, and use only as directed. AURUM provides hours of relief and is one of the most effective analgesic pain relieving applications available without a prescription.

AURUM is available in a 2 oz. size and also in an economical 8 oz. size through all local pharmacies. AURUM Analgesic Lotion can be obtained by asking your pharmacist to order it from his or her wholesale drug supplier for next day delivery. Retailer and pharmacist information (800)256-9008. Look for AURUM at Eckerd and Albertsons' pharmacies.

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CHICAGO (Special) - Research from centers around the world report what ancient healers knew thousands of years ago -- *that vinegar is the wonder elixir for a healthier life.*

Since ancient times a daily dose of apple cider vinegar has been taken to control appetite and maintain well-being.

Even Japan's feared Samurai warriors of years ago relied on a vinegar tonic for strength and power. A tonic you can make in your kitchen.

Today, countless reports and scientific studies praise the curative and preventive powers of vinegar as part of our daily diet.

And now after long research, for the first time, over 300 vinegar super-healing home remedies and recipes have been gathered by noted natural health author Emily Thacker in her exclusive new book, *"The Vinegar Book."*

It's the most complete collection since the discovery of vinegar 10,000 years ago.

You'll learn how to control your appetite to lose weight with a mealtime vinegar cocktail.

Find trusted home remedies to beat colds, ease painful arthritis, and other joint diseases.

Vinegar is nature's own drug-free anti-inflammatory.

Scientific tests show it's a natural storehouse of vitamins and minerals -- over 93 different components -- to fight what ails you.

Imagine! Just one spoonful of apple cider vinegar is endowed with vitamins, minerals, enzymes, amino acids, nutrients and important pectin and beta carotene.

More than 70 different research studies have verified that *beta carotene lowers the risk of getting cancer and it boosts the body's immune system.*

And pectin helps your body reduce cholesterol levels to lower the risk of cardiovascular disease.

"The Vinegar Book" will amaze and delight you with 308 natural ways to enrich your personal life and home. Time-honored folk remedies that show step by step how to mix vinegar with other kitchen staples to:

- Improve your metabolism
- Aid digestion
- Help lower cholesterol
- Uses for middle ear problems
- Condition problem skin
- Fight age and liver spots
- Gain soft, radiant skin
- Amazing hair treatments
- Relieve nighttime leg cramps
- Soothe sprained muscles
- Fight osteoporosis with calcium
- Help headaches fade away
- Corn and callus relief
- Aid to maintain health
- Skin rashes, athlete's foot
- Relieve insect bites

Forget Vinegar On Salad. It Belongs In Your Body!

- Remedy for urinary problems
- Use for coughs, colds
- Destroy bacteria in foods
- Heart and circulatory problems
- Fight high blood pressure

And the above is only a brief sample of the 308 uses for vinegar you'll learn about.

You'll know how grandma's recipe for her famous pie crust depends on a spoonful of apple cider vinegar.

How a combination of vinegar and fruit juices relieves arthritis symptoms and other aches and pains.

Try a delicious low calorie, calcium-and-iron rich chicken soup and vinegar recipe.

Combine your favorite herbs with vinegar to create tenderizers, mild laxatives, mouth washes, tension relievers, and mouthwatering tasty salad dressings and more.

Of course, we all know the cleaning power of vinegar. But Emily Thacker's research has uncovered a host of new money-saving ways to keep your home, laundry, clothing, brass, copper and other possessions sparkling clean. And with less effort.

You'll also delight in making and bottling your own special vinegars. It's so simple to follow Emily's recipes. Homemade vinegars make such wonderful gifts. You could even end up selling your creations to food and gift shops.

And get ready for many compliments when the family and friends bite into those delicious pickle treats you make.

Yes, 308 remedies and recipes are yours to enjoy on a no-risk trial basis for 90 life-improving days. Imagine, three full months without obligation to keep this exclusive, one-of-its kind book.

When you read it you'll say: "Is there anything that vinegar is not good for?"

To get your trial copy direct from the publisher at the special introductory price of $12.95 plus $2 shipping and handling simply do this:

Write "Vinegar Preview" on a piece of paper and mail it along with your check or money order to: The Vinegar Book, 718 - 12th St. N.W., Dept. F5142, Canton, Ohio 44703.

You can charge to your VISA/MasterCard by mail. Be sure to include your card number and its expiration date. And for even faster service -- credit card orders only -- phone Toll Free 1-800-772-7285, Ext. F5142.

Want to save even more? Do a favor for a relative or friend and order 2 books for only $20 postpaid. It's such a thoughtful gift.

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SPECIAL BONUS - Act promptly and you'll also receive Brain & Health Power Foods booklet absolutely FREE. It's yours to keep just for previewing *"The Vinegar Book."* Supplies are limited. Order today.

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The Wild Man

continued from page 74

they've already pumped out his stomach, I'd say about 60."

"OK, let's write it down. Jed says 60. I say 85." I write both numbers on a piece of paper and put our initials by them. "Now your turn, Richard."

"Oh, I don't know. You see more theophylline toxicity than I do. We did hemoperfusion on a guy last year with a level of 84 [the same patient mentioned above]. He was pretty sick, too, and he had seizures. I'll go way out and say 90 for this guy."

I write his guess down with the other two. Our range is 60-90. No matter who is closest, it is clear we all suspect a very high level.

But not high enough.

"Dr. Martin, the lab's on the phone." I take the receiver.

"Yes?"

The lab technician is excited. He asks if the patient is still alive.

"Yes. Are you sure about the level?"

He's run it twice, and is sure. I thank him and hang up the phone.

"Wellllll?" Dr. Malcolm asks. "The winner is . . ."

"One hundred and sixty-seven."

"Wow!" exclaimed Jed.

The hemoperfusion goes smoothly, as Mr. Cartney's blood is circulated through a machine that contains the special charcoal column. Blood is routed from the large femoral vein in his thigh, bathes the charcoal column so theophylline can be absorbed, and is returned to his body through the same vein. Quite an elegant process. We remove Mr. Cartney's stomach tube, because it is now superfluous.

After four hours of hemoperfusion, his theophylline level is down to 88 mg/L. After eight hours, it is 56. At this level, his heart rhythm miraculously returns to normal. We stop the sedative medication. He is beginning to wake up.

Twenty-four hours later, his theophylline level is 21 and he is fully awake. We disconnect the ventilator and pull out his endotracheal tube. He seems all better.

And he is a nice guy. No more wild gyrations. No more foul language. He seems both pleasant and contrite.

"What happened?" I ask.

"I don't know."

"Did you want to kill yourself?"

continued on page 103

THE SATURDAY EVENING POST

FALL 1994 CATALOG SHOPPER

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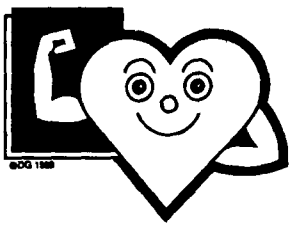

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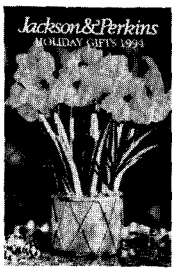

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FALL 1994

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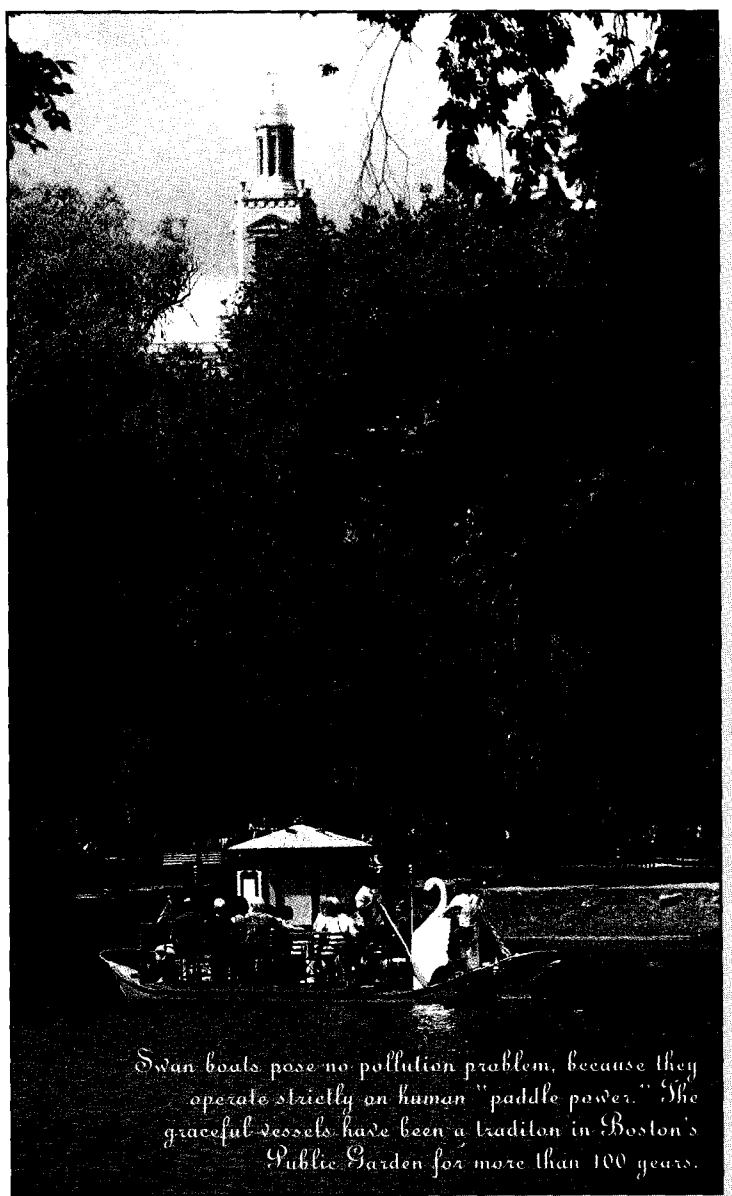
Boston:

✪ For Old Time's Sake ✪



Swan boats pose no pollution problem, because they operate strictly on human "paddle power." The graceful vessels have been a tradition in Boston's Public Garden for more than 100 years.

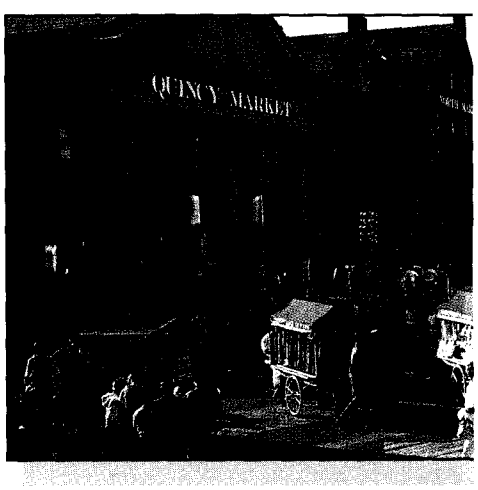
Where else can you hop a swan, fool a computer, and toss a little tea into the harbor?

by Paula R. Hastings

Together they did it—they fooled the computer. Seven-year-old Tommy sat on his dad's shoulders, and the height-measuring computer said in a voice only another computer could love, "You appear to be about seven feet, ten inches tall. You should give the Celtics a call." Proud of their deception, they moved on to another exhibit at the Computer Museum.

Dad challenged a PC to a game of chess. (In record time, he lost.) Mom was engrossed in dickering with a computer strawberry merchant. Tommy's big sister got a printout of her name in Braille. Later, they asked the giant, two-story Walk-Through Computer—with keys big enough to stand on and a tracking ball five feet in diameter—to find the shortest airline route to Paris. Later that morning, they planned to relive a bit of history by throwing tea into the harbor at the Boston Tea Party Museum next door.

A few blocks away, at the New England Aquarium, visitors will see more than one dad filming the action in the world's largest fish tank. Most people come to the aquarium in families; two sisters, for example, recently eyed some sharks among the zillions of fish in this giant coral reef. ("I love sharks," proclaimed Lanie, the older sister. "Yuck!" replied Chrissie in horror.) One nine-year-old tugged on his mother's arm, urging her to see a diver in one tank feeding some stingrays. Later, Lanie and Chrissie's family would witness a sea



Browsers love Boston's thriving Quincy Market—also known as Faneuil Hall Marketplace—for its 150 restaurants, shops, food stalls, and pushcarts.

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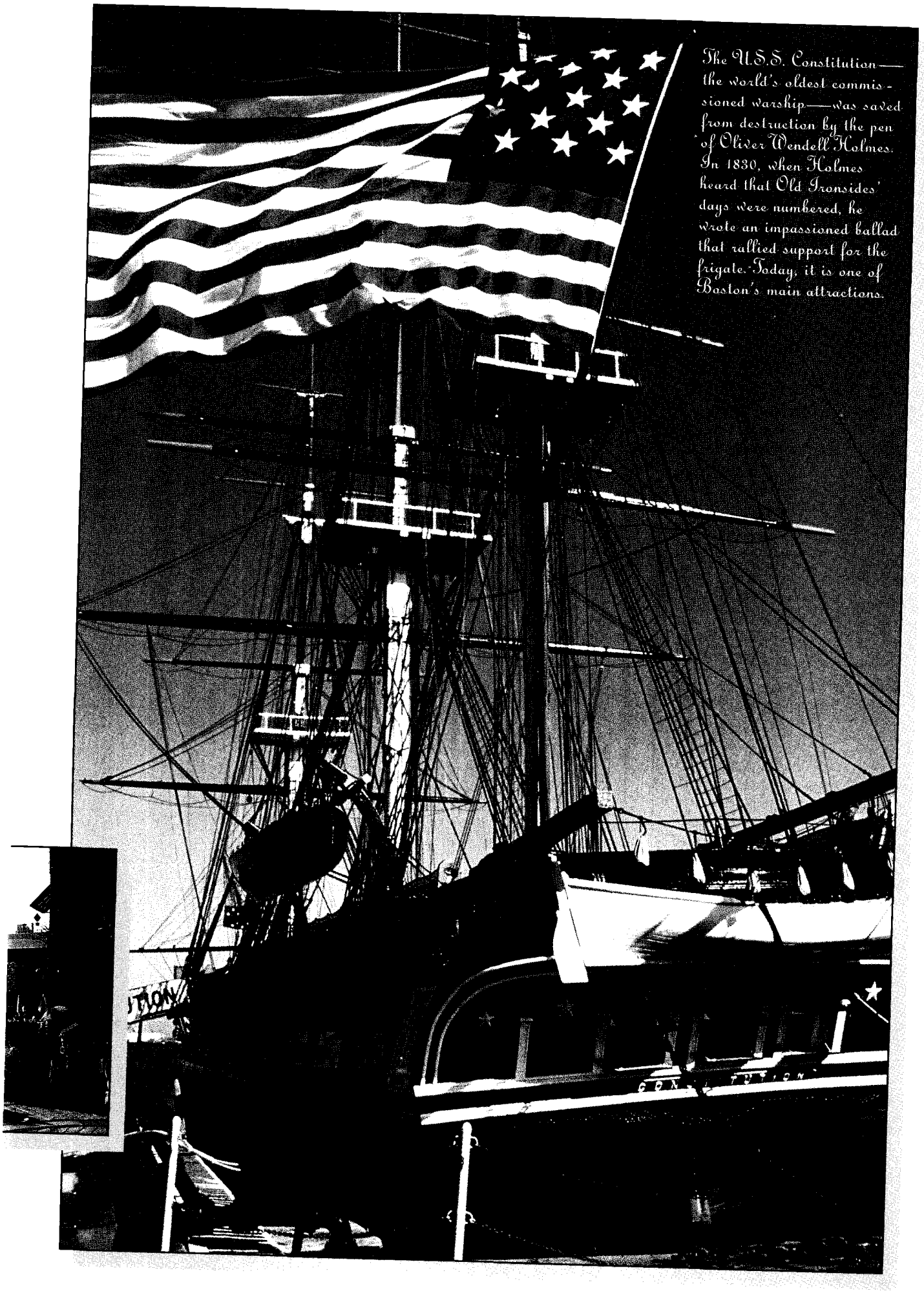

The U.S.S. Constitution—the world's oldest commissioned warship—was saved from destruction by the pen of Oliver Wendell Holmes. In 1830, when Holmes heard that Old Ironsides' days were numbered, he wrote an impassioned ballad that rallied support for the frigate. Today, it is one of Boston's main attractions.

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For More Information

✪ **Freedom Trail information and schedules:** Call 617-242-5642. Mostly free, but a few sites charge a minimal admission fee.

✪ **U.S.S. *Constitution* and Museum:** Admission is free to "Old Ironsides." Adults can visit the museum for $2; children for 50 cents.

✪ **Boston Red Sox:** Tickets for afternoon and evening games range from $5 to $12. Reserve early. 617-267-1700.

✪ **Whale watching:** Reservations are necessary. Call AC Cruise Lines Wednesday through Sunday mornings at 800-422-8419.

✪ **New England Aquarium:** Weekends and many weekdays. Call 617-973-5277.

✪ **Boston Harbor Whale Watch:** Daily daytime and sunset cruises. Call 617-267-4321.

✪ **Museum of Science Omni Theater:** 617-723-2500.

✪ **Boston Harbor Islands:** 617-740-1605.

✪ **T passes:** Three-day unlimited travel is $9 per person or seven days at $18. Buy passes in advance by mail, at the airport, or at any other major outlet. Call 617-722-5218 or 722-3200. Hundred-dollar discount coupons are available. A best buy.

✪ **Water shuttle:** Runs every 15 minutes Monday through Friday from 6:00 a.m. to 8:00 p.m. and every 30 minutes on Sunday from noon to 8:00 p.m. Closed Saturdays and holidays. Transports to all airline terminals. Adults $7, children under 12 free.

✪ **Rail transportation:** Amtrak travels to and from the newly renovated South Station, as well as Back Bay. Call 1-800-392-6099.

✪ **General information:** Write the Greater Boston Convention and Visitors Bureau, P.O. Box 490, Prudential Tower, Suite 400, Boston, MA 02216, or call 617-536-4100.

lion demonstration that blended humor with an environmental message.

At the Children's Museum, a family from Minnesota milled around in the Recycling Store, where they bought a bagful of odd-shaped foam and plastic pieces for craft projects back home. All the kids had clambered happily through a two-story climbing sculpture. They learned about bones, Native Americans, and how mechanics repair automobiles. The whole family participated in a variety of multicultural displays, including the ambitious "Teen Tokyo" slice-of-Japanese-life exhibit, complete with realistic subway.

Be honest, now. When you think of taking the kids on vacation, do your ideas begin with Disney World and end with camping? Why not go to a place where the whole family can experience new things and, in the process, learn about each other? Boston offers just such possibilities.

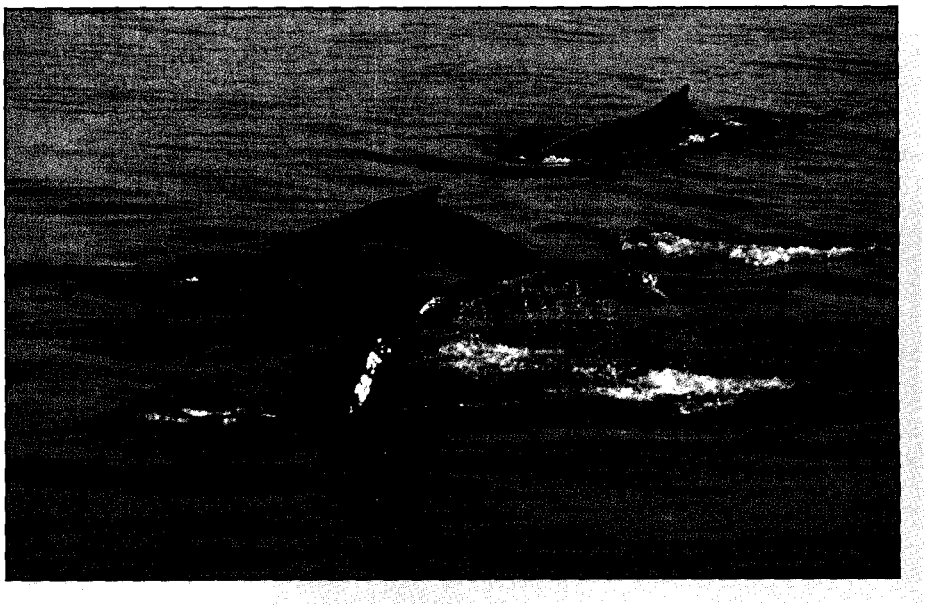
Get acquainted with Boston on a sightseeing trolley, where you can stay aboard a Bean Town, Old Town, or Boston Trolley for a 90-minute narrated tour, or get on and off as many times as you wish all day for one price.

Boston's compactness makes it a renowned walking city. Hiking the Freedom Trail puts such famous historical names as Paul Revere, Ben Franklin and Bunker Hill into a real context. The trail includes many historic sites, including the popular U.S.S. *Constitution* and *Constitution* Museum. Stroll the trail alone or take a guided walk, available with reservations. Families interested in 19th century African-American culture in Boston can walk the Black Heritage Trail.

Get a bird's-eye view of the city from the top of the John Hancock Observatory (the tallest tower in New England, with exhibits and light-and-sound show), the Customs House Observation Tower, and the 50-story high Skywalk Observatory at the Prudential Tower. The Hancock and Prudential facilities charge a reasonable fee; the Customs House is free. The kids will probably remember the long elevator rides to the top more than the views.

No trip to Boston would be complete without a ride on the famous Swan Boats in the Public Garden. Since 1877, pristine white boats, shaped like swans, have carried delighted passengers on 12-minute paddle-wheel rides where kids of all ages feed the lagoon's resident ducks. The cost is a mere 75 cents for adults and 50 cents for children. The garden itself is resplendent with blooms and a fine selection of interesting trees for the budding horticulturist.

Some families come to Boston because one parent is attending a business convention. While Mom's working, Dad could take the tribe to a Boston Red Sox game (with mandatory hot dogs) or to the Sports



Thar she blows! A leviathan family surfaces within easy camera range of whale watchers. Boston's seaside location allows visitors to sample the ocean in brief spins around the harbor or in all-day treks to Provincetown.

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Museum of New England in Cambridge.

Or, if after a few days together you want to split up the family for a change of pace, Pop and some of the brood could visit the Franklin Park Zoo or the Mapparium at the *Christian Science Monitor* building. At the same time, Mom and the others could shop on tony Newbury Street, at landmark Filene's Basement, or at bustling Faneuil Hall Marketplace (Quincy Market). A visit to Chinatown (the country's third largest Chinese neighborhood) or to any of the city's many fine museums will also fill the bill.

The Museum of Science is a splendid afternoon excursion, with about 400 exhibits. There's a first-rate planetarium (no children under age five admitted) with a 45-minute lecture and demonstration several times daily. In the Omni Theater, a monster screen and 360-degree sound dramatize a variety of exciting science films (for which you should make advance reservations). The Discovery Room is always a favorite stop for the grades-K-through-four set.

To take advantage of Boston's prime coastal location, plan to explore the waters around Boston. For a few dollars per person, take a 55-minute boat ride along the beautiful Charles River, or take an all-day excursion-cum-picnic (with fishing, swimming, hiking, and sunbathing) to one of the seven islands that make up the Boston Harbor Islands State Park. You could also take a Boston Harbor tour or a boat trip to Gloucester (an old fishing community northeast of the city), or stroll along the 3½-mile Nantasket Beach in nearby Hull. Or how about a day-long trip to Provincetown (an arty, picturesque—though touristy—spot on the northern tip of Cape Cod)?

Whatever you do, plan to enjoy the ultimate ocean experience: whale watching. The thrill of seeing a breaching leviathan is unforgettable. Just ask one enchanted 11-year-old from Kansas, who proclaimed the event "awesome."

An excellent, reasonably priced public transportation system, called the T, gets you easily around Boston. You can buy a three- or seven-day pass that includes many sightseeing discount coupons. Sixteen Boston hotels offer special family packages to suit all budgets. Perks include

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reduced overnight rates, complimentary breakfasts and children's menus, kids' gifts, milk and cookies, free Swan Boat rides and duck-feeding packets, and hotel activities.

The Greater Boston Convention and Visitors Bureau has produced a special "Kids Love Boston" guidebook, with puzzles, games, lists of family attractions, and an illustrated map of Boston for kids. Families can receive the T pass and guidebook upon check-in at participating hotels.

If you're departing Boston by air, why not catch the water shuttle downtown and cross Boston Harbor to the airport? The shuttle leaves frequently from the handsome Rowes Wharf promenade, and it sure beats a cab.

While waiting for your flight, buy some take-home lobsters while the little ones enjoy Logan International Airport's "Kidport" in Terminal C. There, youngsters can climb on big aircraft sculptures and enjoy hands-on play equipment and interactive computers.

To help youngsters chronicle their trip, buy a picture postcard every place you stop, then fasten each postcard with a round notebook ring. This loose-leaf portfolio can double as a show-and-tell project for school, as well as a family memento.

You'll get valuable insights from hearing what your youngsters liked best and least about their Boston experience. With so many great things to see and do, this outstanding city offers something for each member of the family.

Can you name this picture?

. . . contest: *The Saturday Evening Post* will award $100 to the author of the winning limerick for this picture. Your limerick must contain exactly five lines.

Send your entry on a postcard. Entries will not be returned. Enter as many times as you wish.

Send entries to: Limerick Contest, *The Saturday Evening Post*, 1100 Waterway Blvd., Indianapolis, IN 46202.

All eligible limerick entries must be postmarked by October 22, 1994.

The winner of the September/October 1994 contest will be announced in the January/February 1995 issue.

Our congratulations and a check for $100 go to Donna Neely of Seminole, Florida, for the winning entry in our May/June 1994 caption contest.

As a painter she's trying to prove
On the market her landscapes will move.
Though her critic's no pro,
His expression does show
That they never will hang in the Louvre.

Prevarication Jones

continued from page 47

it was not a satisfactory arrangement.

In September he will be back, the boy told himself all summer long. *And then my father will see that he should stay here and teach school—even if he is the biggest tarnation liar west of the Alleghenies.*

Prevarication Jones did come back in September, but a little later than usual, and it was plain that he was not well. The journey had tired him, he said, and he talked about mountain sickness and said he knew of a particular root shown him by an African when he was on the Barbary Coast that would cure him. It grew hereabouts as well as in Africa. He must first rest and then find the root and all would be well.

"It's your fault, Mr. Platt," said his wife, when she got him by himself. "You've taken the heart out of him. He's not telling his tales the way he did. You should be ashamed of yourself."

"What? For telling him he's a liar?" said her husband.

"No gentleman would do such a thing," replied his wife.

"A liar's a liar," said Mr. Platt.

"And a gentleman is a gentleman and wouldn't say so," said his wife in unaccustomed rebellion.

Prevarication Jones stayed a week, but grew weaker rather than stronger.

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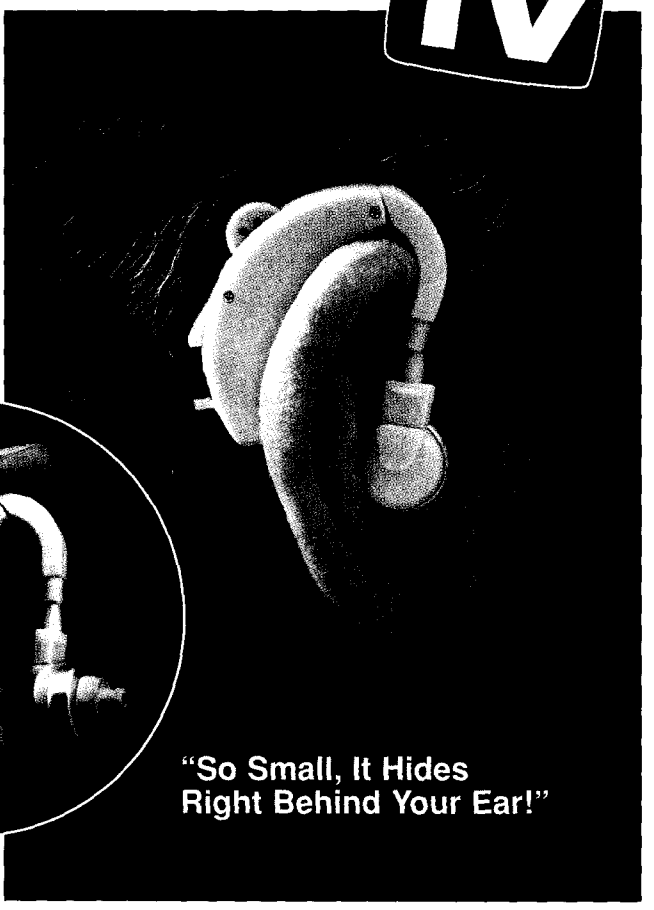
AS SEEN ON TV

Incredible WhisperXL™ Gives You Super Hearing For Only $29.95?



This is the SAME famous Whisper XL™ sound amplification device that has been nationally publicized on TV and in leading publications – similar to those that have been sold in Europe for much, much more! But during this nationwide publicity campaign, TeleBrands is offering them for the unbelievable price of just $29.95 only to those who respond to this ad before Midnight, October 20, 1994.

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Don't be fooled by the small size or appearance of this device. The WhisperXL™ may look like a simple device designed to hide right behind your ear, but is actually a major breakthrough in sound interception and amplification technology. State-of-the-art electronic engineering actually allows you to hear a whisper up to 100 feet away. It works so incredibly well that you literally won't believe your ears!

A New World Through Super Ears!

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WhisperXL™ has dozens of practical uses! Take it to the movies, theater, or lecture hall and you'll never miss a word. It's great for watching TV with a spouse – just keep the volume on low and turn on WhisperXL™. She can read while you watch the ball game! Now you can enjoy the crisp, clear sound of a TV or radio playing at low levels, without annoying everyone else in the room. Experience the fascinating world of super hearing - order today!

The WhisperXL™ weighs less than an ounce, has 6 sound levels to accommodate your own sound enhancement desires, an on/off switch right at your fingertips and, best of all, it adjusts and rotates for ultimate comfort so you can wear the WhisperXL™ behind your left or right ear! WhisperXL™ comes complete with battery and a one year money back guarantee.

WARNING: It is prohibited by law to spy or listen to the private conversations of others without the permission of at least one party.

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To be sure, the women brought him broths and soothing drinks and fussed over him and made the children play away from the Platt house so he could get some rest. But, as Mrs. Platt had said, his illness was of the spirit, and without the spirit the body could do little.

Finally one day Mr. Platt took his son aside. "Boy," he said, "do you write well?"

"Yes," said the boy.

"I mean ciphering, not printing. I can print myself."

"I cipher well if I have the good quill," said the boy. "The one Mr. Jones brought from Philadelphia. The one that was used by Mr. Jefferson to write the Declaration of Independence."

The father flushed and was about to say something about tarnation lies, but checked himself. "All right," he said. "Get it and some paper and some sealing wax and bring it over to the schoolhouse. I have a letter for you to put down as neat as you can. Say nothing about it to anybody."

The boy did as he was told, and the letter was written.

That night the neighbors assembled again in the Platt house, as was their custom. Prevarication Jones was there in the chair that was reserved for him, but nobody expected him to tell any stories because he was feeling so poorly. To thank them, he tried, but every time his eyes met those of Mr. Platt, he failed and the spirit went out of his tale. In telling the story of the Indian chief and the wonderful bluestone, he did not even bother to produce the stone, such was his lack of animation.

"I have an apology to make in your presence to Prevarication Jones," said Mr. Platt, blushing but resolute, when this particular tale was done.

"I had accused him privately when he was last here of lying about the Battle of Bunker Hill. I told him that George Washington was not there at that battle, and so his whole story was a lie. But I have got a letter brought down the river that shows he was right and I was wrong. Boy, give me that letter."

The boy reached for the letter his father had dictated to him and about which he had been told to say nothing, but to be ready to produce it. But, even while he was fumbling in his pocket, Mrs. Platt was on her feet. Blushing slightly, she herself produced a letter—a letter with a big wax seal on the cover and addressed in a florid and forceful handwriting.

"I think this is the letter you want, Mr. Platt," she said in her small but determined voice. "It came by the keelboat yesterday."

Much disconcerted, Mr. Platt took it from her, turned it over a couple times, opened it, glanced at the signature at the bottom and started reading. It went:

"*Madam:* I trust you will forgive the delay in replying to your letter about one Prevarication Jones and his part and mine in the Battle of Bunker Hill. I have read with interest your story of his account and have been deeply moved by it.

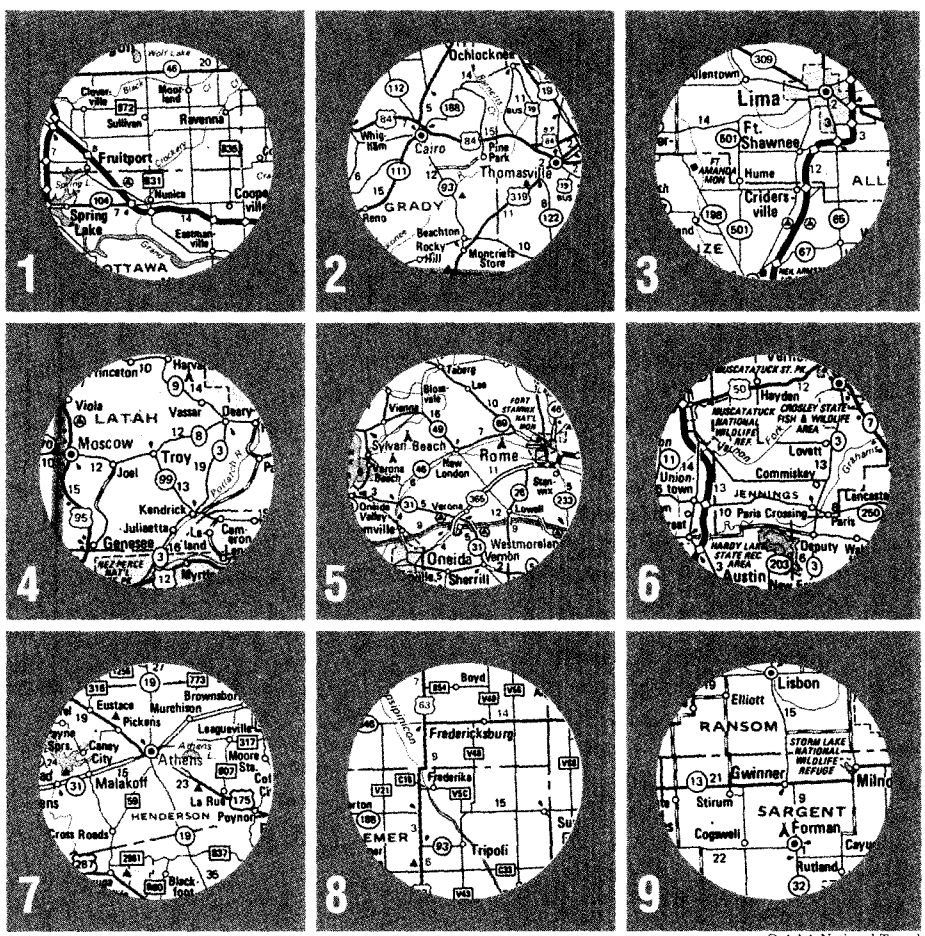
"The Continental Army was made up of many men such as Prevarication Jones. It was they, rather than I, who saw the Revolution through to success. It is their tale, quite as much as mine, that should be given credence by their fellows in the recounting of the many battles they fought against appalling odds. Let me say that I am indebted to Mr. Jones for making me the hero of his tale, and let me add also, Madam, that I could not, with honor, quarrel with a word of it.

"Your Obedient Servant,

"George Washington."

There was a deep silence when Mr. Platt had finished reading this letter. All eyes were on Prevarication Jones, who was working his mouth and who raised his sleeve for a moment and brushed it fiercely against his cheek.

continued on page 103



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Where do you think you are?

East or West, North or South, each of the distinctive areas above appears on the map of a single city, state, or province. In terms of routes, state parks, mountains, and memorials, there is, as the saying goes, "no place like it." Can you identify these locations? If you find the game too easy (but you won't), try to guess the theme of this month's map game.

(Answers on page 103)

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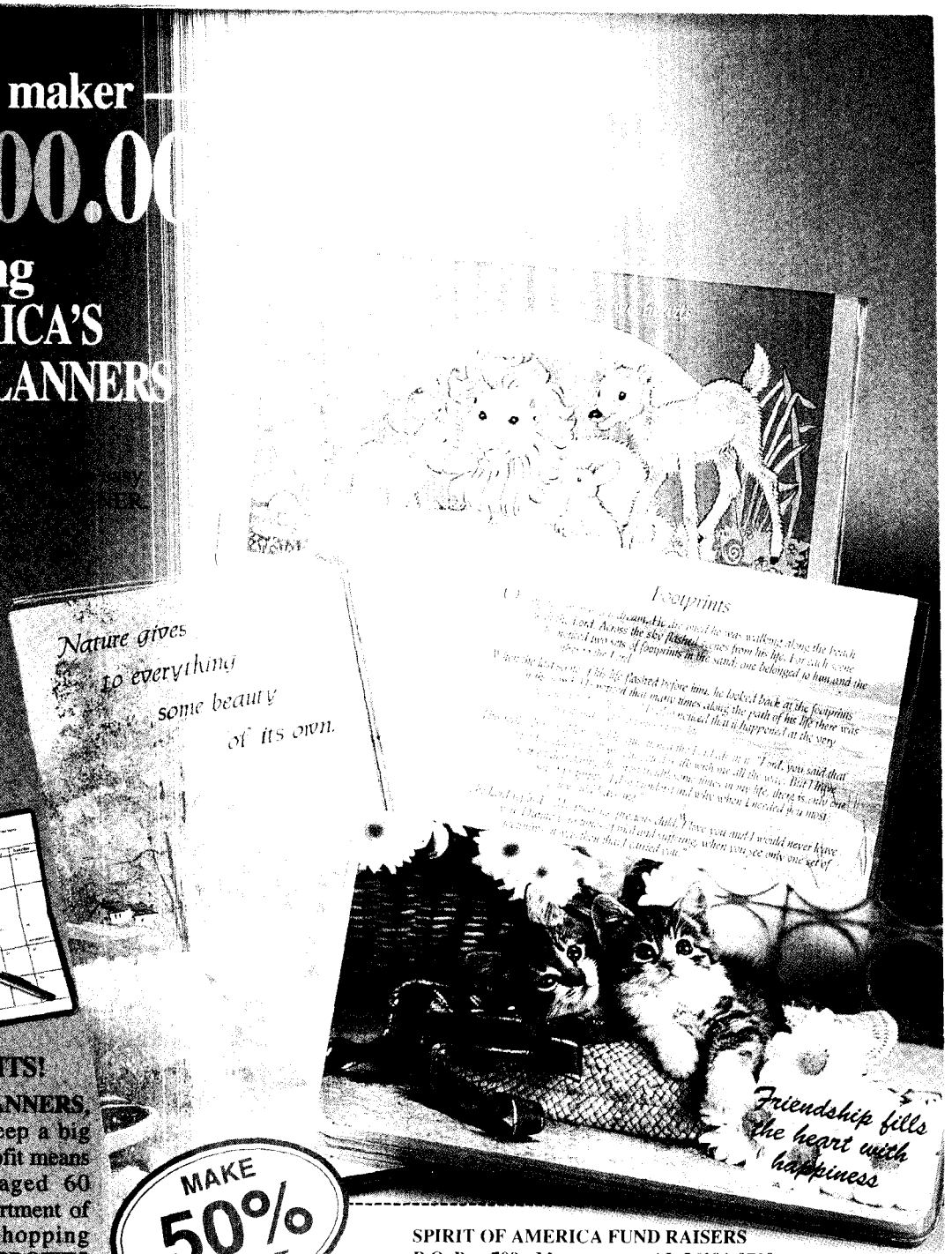

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MEDICAL MAILBOX

by Cory SerVaas M.D.

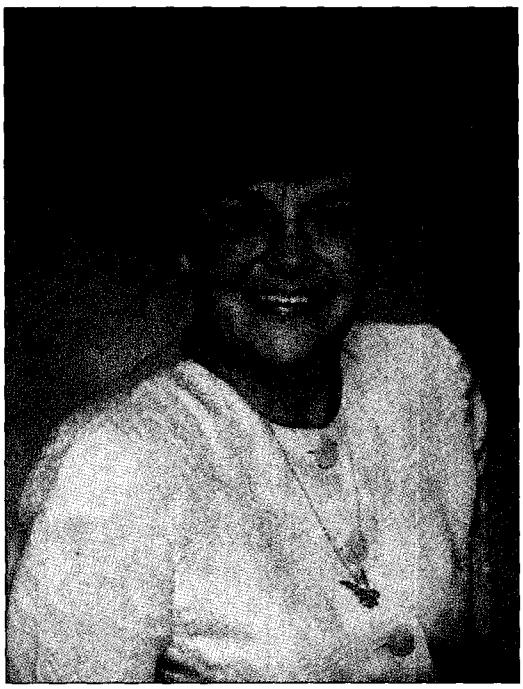
"... we place the responsibility for prevention in the hands of those who encounter only a small part of the population and whose aim is to cure rather than deter disease..."
—Michael Alderman & Doug Shenson, Montefiore Medical Center

Double-Lung Transplant—Seven Years Later!

Patsy Ruff is a modern medical miracle. And no one knows it more than Patsy herself. In 1985, 41-year-old Patsy Ruff was a severely handicapped emphysemic, using oxygen 24 hours a day and weighing 75 pounds—a woman with little hope. One day, a neighbor came to her house with a magazine, saying, "You've got to read this article!" She was holding a copy of the June '85 *Saturday Evening Post* with a coverline, "Hope for Emphysema Patients," detailing the incredible work of Dr. Joel Cooper in Toronto, who was performing single-lung transplants and, soon, hoped to perform double-lung transplantation.

Nothing's been the same since.

Patsy underwent a double-lung transplant in July 1987 and today is a busy, healthy 50-year-old woman, helping other patients learn about the operation, spreading the word about the dangers of smoking, and generally enjoying life.



The picture of health: Patsy Ruff is getting the word out about lifesaving lung transplants.

"I'm doing great!" Patsy told us recently. "Just happy to be alive and able to help other people going through this surgery. At the time I underwent it, there was no one. It's nice to send people away and watch them come back walking, talking, and doing what they want to do."

Patsy works full time as director for the capital region of the American Lung Association of Alabama. When asked if she curtails any of her activities, Patsy quickly replied, "No, I go full blast every day!"

Patsy talks to people all over the United States about lung transplantation, spreading the good news about the life-giving procedure.

"Back then, I believe Dr. Cooper and Dr. Alec Patterson were the only ones doing the surgery. Dr. Cooper pioneered it," Patsy explained. "Today, five major centers are in Stanford, California; St. Louis, Missouri; Chapel Hill at the University of North Carolina Hospital; Pittsburgh; and the Mayo Clinic in Minnesota. Of course, there are other centers that have started doing lung transplants."

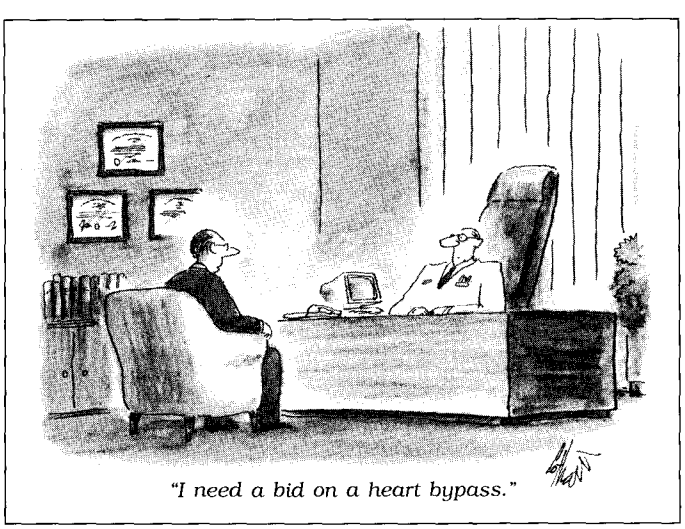
Patsy visits Dr. Cooper (now at Barnes Hospital in St. Louis) for an annual checkup and catches up on the latest adventures of this medical pioneer.

"He doesn't stop. In fact, he is doing another surgery right now on emphysema patients," Patsy told us. "It's an old surgery called a lobectomy, but Dr. Cooper is doing it in a new way for people that have emphysema and the rounded barrel chests. He is cutting out part of the lung, allowing the patients space to breathe. He has performed 20 operations and had 20 successes.

"The surgery could really help people who feel they are too old to have the transplantation surgery, or even a younger person who was totally disabled, but not quite ready for transplantation. They could have the lobectomy, and when they did get severe enough, they could go ahead and have a lung transplant. It wouldn't interfere."

At home or at work, Patsy is getting the word out about the operation that gave her a second lease on life and could do the same for others.

"Some people are so afraid when you mention the word 'transplantation'," Patsy said. "They don't exactly know what to do, so they'll call me, and I tell them to 'go for it.'"



"I need a bid on a heart bypass."

Mysteries of IBD

Dear Dr. SerVaas:

This is a strange request—I'm sure. But I have what my doctor has diagnosed as irritable bowel syndrome, and after I read the article in *The Saturday Evening Post* written by you concerning the discovery of *Helicobacter pylori*, the virus that causes ulcers, I was excited because of the little bit you had at the very end concerning the above-mentioned problem. You see, I had a bladder

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infection this spring, and a doctor at the hospital gave me Septra DS. Within 10 hours, I was back to a normal bowel movement and *NO* gas! I was on those meds for about seven days, and that wonderful normality lasted about five days after. But, according to my family doctor, the Septra could not have caused those results, and they wouldn't have helped. According to him, it was just a fluke that the Septra was being taken when I got relief. Thank you for your help and your time.

Christi L. Broersma
Holland, Michigan

Please read about Mary Stolberg's astonishing good health after she experimented with Dr. Marshall's "ulcer cure" (page 60). We're sending you the addresses of several innovative Grand Rapids physicians who have open minds and, I'm sure, will not be afraid of trying safe, noninvasive intervention. We're also sending you a packet of material that Dr. Marshall has given us. The material is written for presentation to a physician who may wish to try his regimen if the patient's symptoms meet his criteria.

Dear Dr. SerVaas:

In the waiting room of my physical therapist, I picked up the Jan./Feb. '94 issue of *The Saturday Evening Post* covering Crohn's, IBD, etc. I could not put it down and have shared it with many people, as I am looking for answers to the mysteries of these diseases.

My 35-year-old daughter had a bout with numbness and tingling in her left hand when she was in her early 20s. This condition was treated with vitamin B_6 and subsided. She was then diagnosed with spastic colon, then IBD, and treated. Many foods have been eliminated from her diet, which helped. Her health continues to deteriorate with septic ovaries and uterus, both treated with medications and laser. While all this was going on, she was also diagnosed with Lyme disease and treated with large doses of antibiotics.

Dr. Kozarek mentions many similarities to Maureen's history (eye problems, autoimmune disease, etc).

Dr. Barry Marshall also mentions spiral bacteria found in animals with IBD. I would like to get in touch with both doctors, or anyone who might be able to point me in the right direction. My personal thoughts go back to IBD and complications increasing with treatments for the latter diseases. And, most of all, could Lyme disease be misdiagnosed, and maybe related to similar spiral bacteria that Dr. Marshall speaks of? Thank you for your time.

Eleanor M. Berge
Carmel, New York

Dr. Barry Marshall can be reached at the International Research Foundation for Helicobacter and Intestinal Immunology, P.O. Box 7965, Charlottesville, VA 22906-7965.

Dr. Richard A. Kozarek can be reached at Virginia Mason Medical Center, University of Washington, P.O. Box 900 C3-N, Seattle, WA 98111-0900.

Spinal Muscular Atrophy

Dear Dr. SerVaas:

Your medical information helps many appreciative people. My darling granddaughter was diagnosed at age one year with a little-known spinal muscular atrophy. When I asked Easter Seals about it, our local chapter was unaware of it. I gave them copies of the information I had from my daughter, and they have started a file on SMA. Hopefully, they will never have any patients with it!

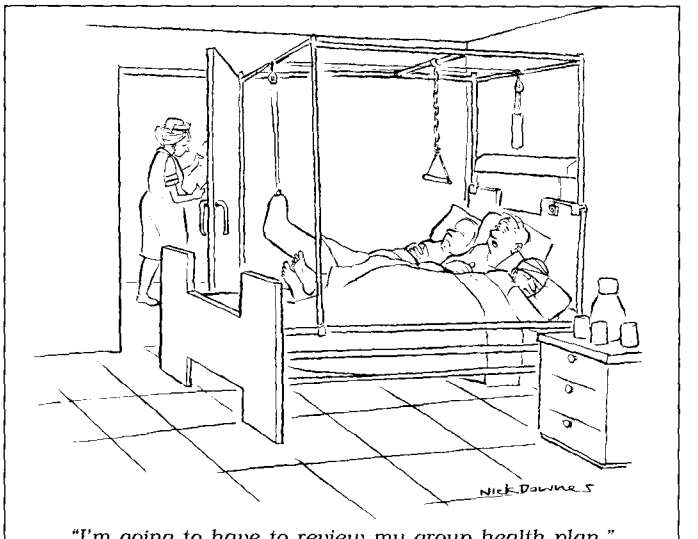
Audrey Winkelsas, almost 19 months old—standing!

The last weekend of March, the nonprofit organization, Families of SMA, had its third national conference in nearby Orlando. My daughter and her family live there, and we all attended the very informative, helpful conference. My daughter is an x-ray technician and her brother (my son) is a gynecologist, so I mean no disrespect when I say how amazing it was to learn that physicians know so little about this disease. One of the medical speakers explained that this is a relatively "new" disease.

Victims and researchers need national support to discover the cause and, hopefully, the cure to this genetic disease. As a grandmother of an 18-month-old victim, I pray for the help these youngsters need so desperately. Any encouragement, help, and guidance you can offer will be greatly appreciated.

Vina H. Springer
DeLand, Florida

Spinal muscular atrophy (SMA) is an inherited disease that causes muscles of the trunk, neck, pelvis, and shoulders to become gradually weaker. Muscles of the face, hands, and feet are usually not affected, and children have normal intelligence. One person in 60 is a carrier of the defective SMA gene, affecting an estimated one in every 6,000 live births worldwide. SMA types I and II affect infants and very young children. A baby will have this disease only if the defective gene is inherited from both parents. Types III and IV occur in older children and adults. To our knowledge, no treatment is currently known that can prevent, stop, or reverse any form of spinal muscular atrophy.



"I'm going to have to review my group health plan."

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Mrs. Springer, Audrey Winkelsas' grandmother, noticed her sixth grandchild looked "floppy" during the first months of infancy—her little legs did not have the strength they should. Tremors developed in the baby's arms, and after months of suspicion, the diagnosis of spinal muscular atrophy was made when she was a year old. Unable to crawl, Audrey gets where she wants by rolling from room to room. Daily therapy helps strengthen her muscles. Because of a weak cough, any chest congestion is promptly treated to prevent pneumonia. Audrey can sit by herself (although she must be helped to that position) and enjoys her parapodium standing frame. Her grandfather built an adjustable table so she can color and play with small toys. Audrey's future is unclear because no one can say how fast, if at all, the weakness will progress in her case. Her older brother is not affected by SMA.

With open minds and creative adaptations, parents are encouraged to raise their child as they would if he or she did not have a disease. When we talked with Audrey Lewis, executive director of *Families of Spinal Muscular Atrophy*, she was busy fitting her 11-year-old son with a hockey helmet. He can't wait to start playing in an in-line hockey league—wheelchair and all! Mrs. Lewis says the all-volunteer group offers emotional and financial support for more than 700 members and funds SMA research. Dr. Arthur Burghes, head of the neurogenetics lab at Ohio State University, is hopeful the specific gene that causes SMA will soon be identified. He explains it is only by studying the actual disease gene that carrier detection tests, improved prenatal testing, and (ultimately) a treatment and cure may become possible. The Muscular Dystrophy Association also provides support to SMA patients and their families.

Families of SMA may be contacted at P.O. Box 1465, Highland Park, IL 60035 or by calling 1-800-886-1762.

For Celiac Sprue, Eliminate Gluten

Dear Dr. SerVaas:

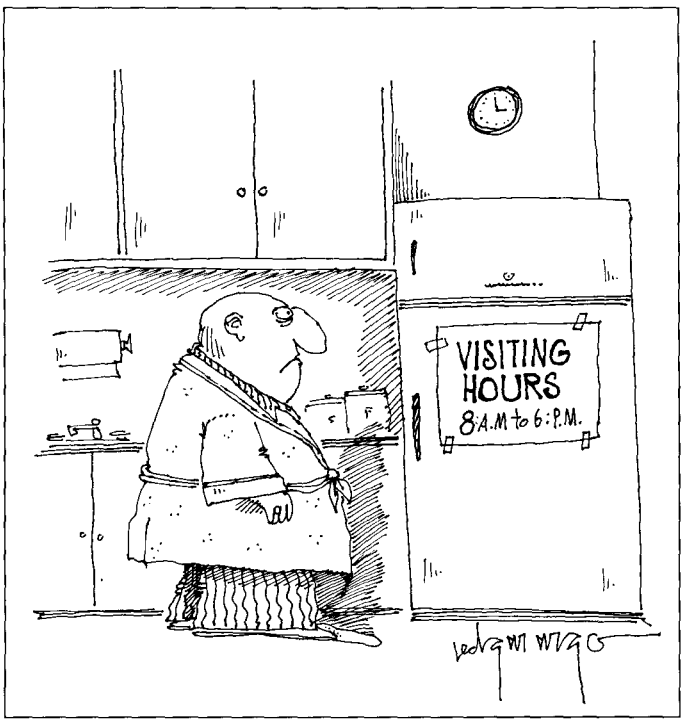
I have read your coverage of ulcers, Crohn's disease, and IBD with much interest, as I had been diagnosed over and over with ulcerative colitis, spastic colon, ulcers, etc., for 35 years. Finally in 1988, I was diagnosed with celiac sprue, and it absolutely turned my life around. I'm 59 years old.

I firmly believe celiac sprue is much more common than most people realize, but so many doctors have never seen it and don't recognize the symptoms. One of the main problems is that patients think they are adhering to a gluten-free diet when it is the hidden gluten that is the hardest to deal with and causes problems.

Mrs. Delbert Miller
Ulysses, Kansas

You're absolutely right.

Eliminating gluten from one's diet sounds deceptively simple, but it is a real challenge to patients, dietitians, and doctors. Obvious sources of gluten are breads and cereals made from wheat, rye, barley, and oats. However, gluten can be "hidden" in such foods as beer, commercial soups, sauce, hot dogs, ice cream, chocolate, processed meats, cereals, and salad dressing. Hydrolyzed vegetable proteins are often not identified on packaging but are commonly derived from wheat and other cereal grains. Following a gluten-free diet requires a constant awareness and years of experience, but as you certainly have discovered, it is well worth the effort.



Margie, the "girl who couldn't eat wheat," is today a vibrant, healthy wife and mother. Margie Leland had been a very sick little girl whose mother feared she would die. Then she was diagnosed with celiac sprue, gave up all gluten, and is living happily ever after. Meet Margie Leland-McElfresh!

Post readers may remember the article "The Girl Who Couldn't Eat Wheat" in the December 1984 *Post*. Margie Leland was 13 years old before her condition was diagnosed and she was placed on the gluten-free diet. You will be glad to know we found Margie Leland-McElfresh happy and healthy, living in Greensboro, North Carolina, with her husband, son, and daughter.

Margie agrees with you that very few people know about celiac sprue. "People are just astonished that you can't eat wheat, oats, or barley," Margie said. "They've never heard of it!" She still must order her hamburger without the bun.

During World War II, Dr. W. K. Dicke, a young Dutch pediatrician, proclaimed that the ingestion of gluten was harmful for some people. Gluten is a protein in wheat and

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other grains that gives dough its tough elastic character. With modern technology, we have been able to learn that tiny, fingerlike projections in the small intestine (called villi) become shortened when celiac sprue patients ingest gliadin, a part of the gluten protein. These abnormal villi are unable to properly absorb nutrients, and diarrhea, flatulence, weight loss, and fatigue typically occur. We have yet to discover what causes this reaction to gluten in some people.

It might interest you to know that Margie's aunt had similar digestive problems most of her life. There is some evidence that celiac sprue is hereditary, and our *Saturday Evening Post* IBD Survey showed that people who have IBD (inflammatory bowel disease) have more relatives with celiac sprue than would be expected in the general population. The *Post* IBD Survey asked patients if they also had celiac sprue in their family histories. Like you, we're afraid that many people may suffer from gluten intolerance and not know how ubiquitous gluten is when they experiment avoiding wheat—only to find their symptoms remain. The Mayo Clinic in Rochester, Minnesota, has an excellent list of foods for celiac sprue patients. You may also write to the American Foundation for Preventive Medicine for a list of foods to avoid and foods that are permitted.

Vitamin B_{12} and Trigeminal Neuralgia

Dear Dr. SerVaas:

I have wanted to write for ages, and the July/August issue about the vitamin B_{12} prompted me—finally!

Having had several severe (what else?) attacks of trigeminal neuralgia (sometimes called Tic D), I have always wanted you to address this problem. It has been written that it is one of the most severe pains known to man, and very little has been done to research this subject.

My first introduction was in 1960; I was 29. It began with the pain on my left face, at first feeling as though I had some bad teeth. It then went up my head and was across my forehead, cheekbone, and jaw. It was excruciating as I went from specialist to specialist. A tumor was suggested and, finally, cutting the nerve was suggested. By luck, when I took our six-year-old son to the family doctor, I mentioned why I looked so terrible. He asked some questions and said he knew my problem. He said it was rather late, but he would try massive doses of B_{12}, which he began immediately—every day for a week until it was eased slightly and then every other day. It was three months before I was significantly relieved.

Since then, there isn't a day that has gone by without me thinking of that pain. In 1980, it hit again, hard. I began the B_{12} shots with my then-physician being somewhat skeptical. Nevertheless, he grilled me completely on the pain and my previous attack. I felt like he needed to pay me! It was another three months before I was myself. As you know, it is hard to function with such pain, and it is very depressing. Just a twinge now can send me into anxiety. I will say Bufferin would ease it, but it would take around-the-clock dosing.

My current physician is also skeptical about B_{12}, saying there is no scientific data to support its easing trigeminal neuralgia. He has allowed me a prescription to attain B_{12}, though, and I do keep it current. I am 63 now and have no record of abusing any drug. In fact, all my doctors have noticed an aversion to any medication.

My only personal research on what may have brought this on for me is that each attack has come after a

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—Mary Pullig Schatz, M.D., Author of *Back Care Basics*

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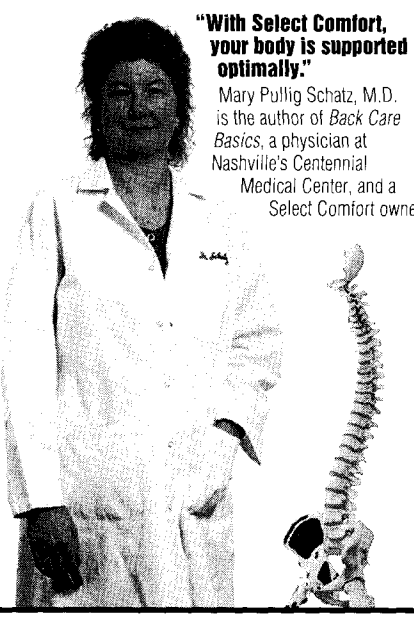

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Mary Pullig Schatz, M.D. is the author of *Back Care Basics*, a physician at Nashville's Centennial Medical Center, and a Select Comfort owner.

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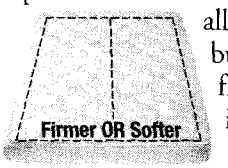

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serious illness or tragedy in my life. The first was after an attack of botulism, the second attack after the death of my dear pet dachshund. Grief was compounded by pneumonia and the finding of a lump in my breast. Smaller attacks came after flu or deaths of family. That is all I can come up with.

The dental college at the University of Kentucky has put me in touch with two other sufferers that took Tegretol. Another person I came in contact with suffered for so long, finally having surgery at Duke. It failed to help but a little.

Of course, I take B_{12} tablets every day of my life. When I feel some pain beginning, I do reach for the needle. Anything to keep it from developing fully. I was anemic as a child, but in adulthood, my blood has been strong. I'm extremely active in many areas of humane and political work. Nerves do not seem to be a problem. I'm only telling all this hoping I can help the study of this terrible affliction.

I hope you can address this at some time because I fear many people have the problem, and many physicians are not aware of this particular one. My current physician said he refers most patients (and said there weren't many in his practice) to a surgeon, and I scolded him for not at least trying some B_{12}.

I have also heard of many cases of shingles being relieved by B_{12}, among these my own mother's.

We both (my husband, Dr. James G. Morris, a metallurgy professor) admire your writings. Good luck in the future.

Virginia Morris
Lexington, Kentucky

Chinese Tree Bark May Help Cancer Patients

After surviving advanced prostate cancer, forest products consultant Tracy Moore decided to dedicate his life to help rescue others from cancer by establishing the XyloMed Research Foundation in Monroe, Louisiana. Researchers at the foundation are studying the Chinese tree *Camptotheca acuminata*.

Tracy Moore, pictured here with the Chinese *Camptotheca acuminata,* is helping researchers explore a new potential anticancer treatment.

In Japan, a compound from the tree, camptothecin, is used for medicinal purposes and is known to attack 12 different types of cancer tumors by interrupting growth cycles in cancer cells.

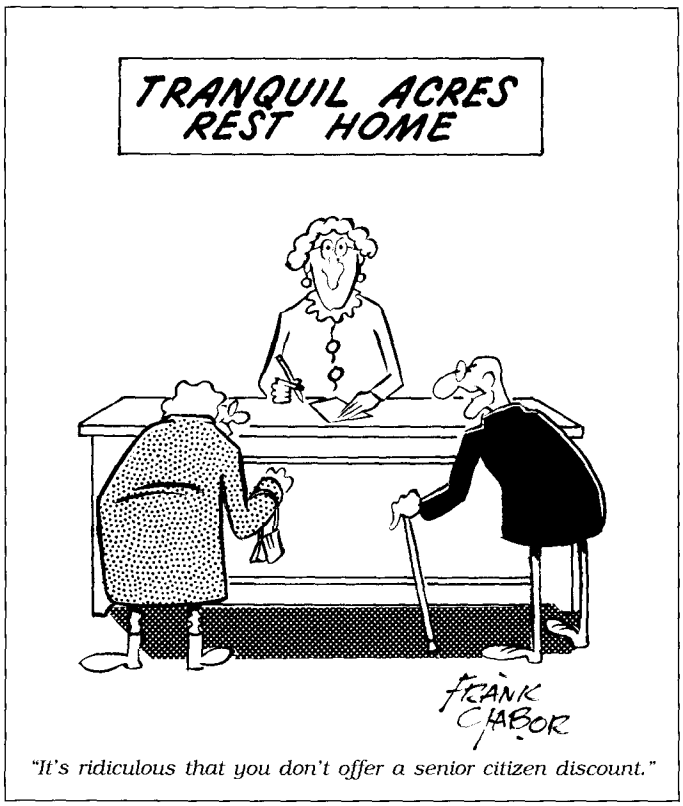
In the October '91 *Post* article "Unlocking the Secrets of Taxol," we reported on the promise of cancer-fighting taxol, derived from the bark of the rare Pacific yew tree and from the needles of the common ornamental English yew, *Taxus baccata*. Taxol has shown promise in treating advanced cases of ovarian cancers.

Inspired in part by the *Post* articles and his personal bout with cancer, Moore took action in 1992 by committing himself to growing the Chinese tree in America to assure ready availability of camptothecin for further research projects.

With the help of Lynn Lowrey, a man also dedicated to growing the promising Chinese plant, Moore was able to interest research groups eager to study the plant. Together, Moore and Louisiana State University have launched a major anticancer program to research camptothecin.

Initial studies have shown that drugs derived from the "tree of joy" are active against a greater number of tumors and produce less severe side effects than taxol. Other results indicate that a derivative of the compound in the tree may be a very powerful antiviral agent, potentially useful in the fight against AIDS.

For more information about Tracy Moore and the "tree of joy," contact the XyloMed Research Foundation, P.O. Box 2942, Monroe, LA 71207-2942.



"It's ridiculous that you don't offer a senior citizen discount."

New Skin

Dear Dr. SerVaas:

We found a product called New Skin that seems great for covering kids' cuts and scratches, and we use it instead of band aids. Is it a safe product to use on children?

Clara Johnson
Minneapolis, Minnesota

We sent your letter to our dermatology consultant, C. William Hanke, M.D., F.A.C.P. He replied:

"Things like New Skin have been available for many years. It probably does work well for cuts. It works by sealing the moisture inside the skin. Research studies have shown that moist wounds heal faster than wounds that are allowed to dry out. I think it is safe, except that it is flammable and is poisonous if ingested. It is possible that children (or adults) might ingest some of the dried film by trying to peel it off with their teeth. It also might cause skin irritation if a person has sensitive skin.

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Official Norman Rockwell Centennial Collectors' Gift Guide

For easy ordering see page 102

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1

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ic, informal style.
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sculpture stands
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quills, and a leather
creases in old Ben's
eem authentic, one of
s in which a brilliant
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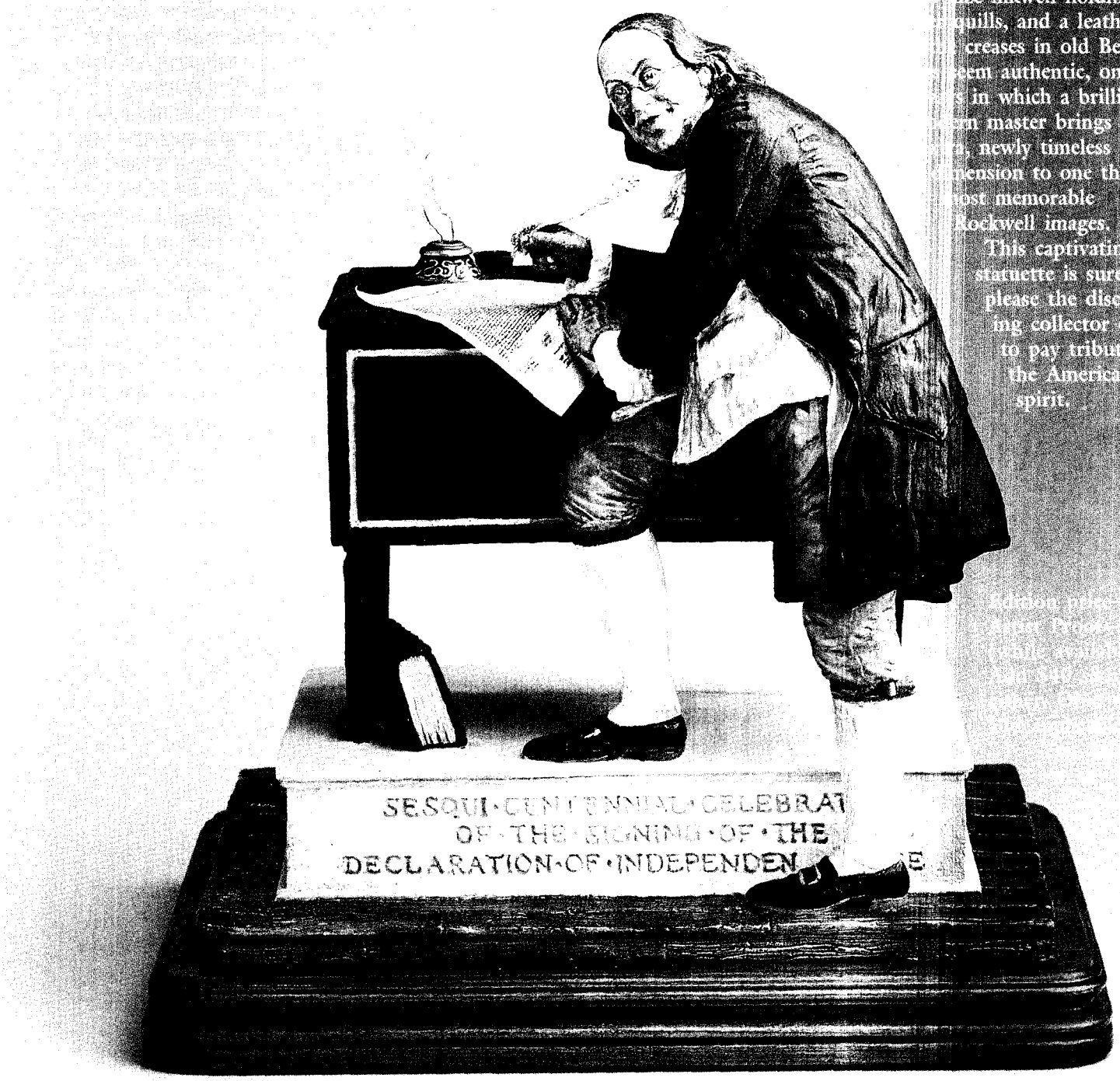
Rockwell images.

This captivating statuette is sure to please the discerning collector eager to pay tribute to the American spirit.



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The Official Saturday Evening Post Norman Rockwell Collection

Pacific Heritage Mint

AMERICA'S CREATOR OF FINE COLLECTIBLES™

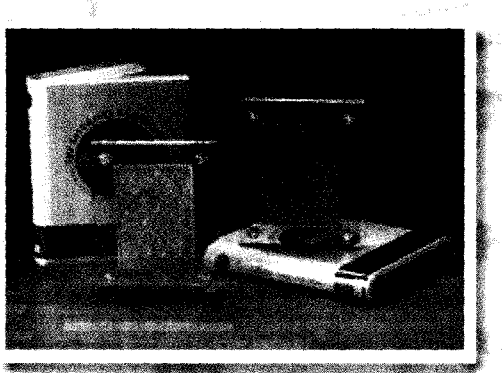
Commemorates America's Finest Artist

1994 offers the opportunity to share and learn more about our American heritage. The relationship between Norman Rockwell and The Saturday Evening Post flourished for nearly fifty years, capturing an America that will be etched in our hearts forever. And now, this year, the 100th Anniversary of Rockwell's birth allows you to capture these historic moments in precious metal covers that will always maintain their mint condition. Created with the utmost attention to detail and accuracy, this limited edition is sure to become a valuable asset and a beautiful addition to any collection.

(Shown actual size - 2 1/2" x 3 1/2")

An Official Rockwell Centennial Collectible

Individually numbered, these magnificent covers are extremely unique, custom minted in an exclusive edition of only 500 silver and 2,500 bronze. No additional covers will ever be minted. Officially licensed by Curtis Archives and The Saturday Evening Post, these exact replicas are minted from 4.25 troy ounces of .999 fine silver or 4.25 troy ounces of pure bronze, assuring you, our valued customer, a treasure for generations to come.



Suggested Retail SILVER - $255 BRONZE - $60

Each numbered, limited edition minted cover comes protected in custom lucite, displayed in a beautiful presentation case with our unconditional satisfaction guarantee and a registered certificate of authenticity.

Now Available

" 100 Years of Baseball "
July 8, 1939

" Bottom of the Sixth"
April 25, 1949

" The Dugout "
September 4, 1948

" Sport "
April 29, 1939

Available in 1994

Summer

- (o Swimming" *June 4, 1921*
- ishing" *August 5, 1929*
- "The Rookie" *March 2, 1957*
- "Gramps at the Plate" *August 5, 1916*

Fall

- "Tackled" *November 21, 1925*
- "Triple Self Portrait" *February 15, 1960*
- "The Toss" *October 21, 1950*
- "Santa" *December 16, 1959*

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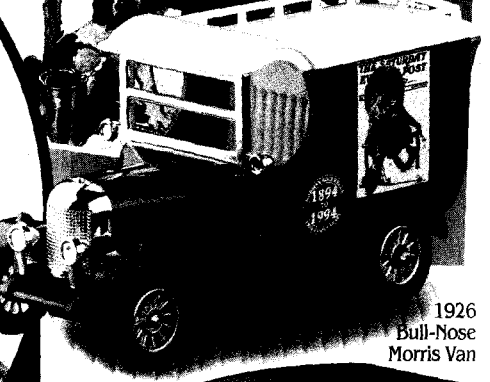
3

DIE-CAST COLLECTIBLES WITH A REPUTATION FOR EXCELLENCE TO MARK THE 100TH ANNIVERSARY OF

NORMAN ROCKWELL

1894 1994

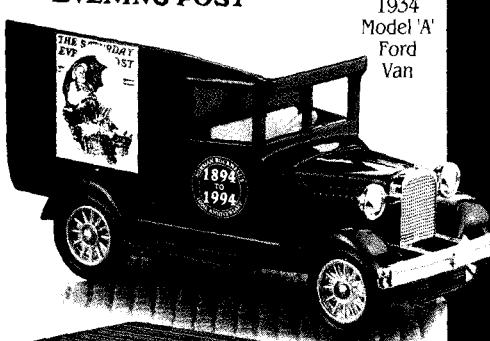
1920 Model 'T' Ford Van

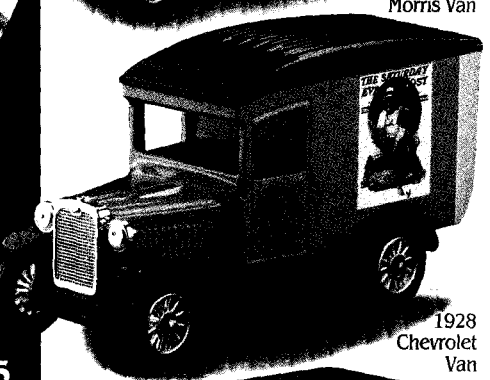


1926 Bull-Nose Morris Van

THE SATURDAY EVENING POST

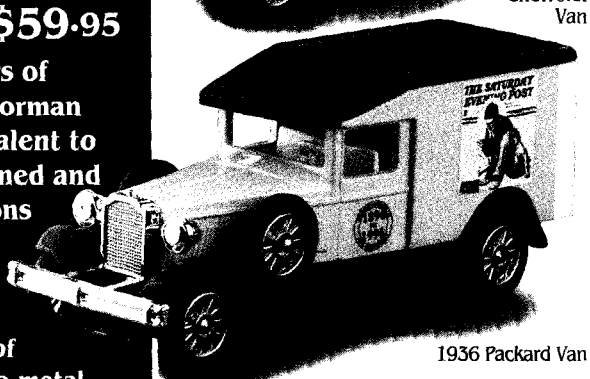
1934 Model 'A' Ford Van





1928 Chevrolet Van

1928 Chevrolet Box Van



1936 Packard Van

The Norman Rockwell-Saturday Evening Post Centennial Collection All Six Models $59.95

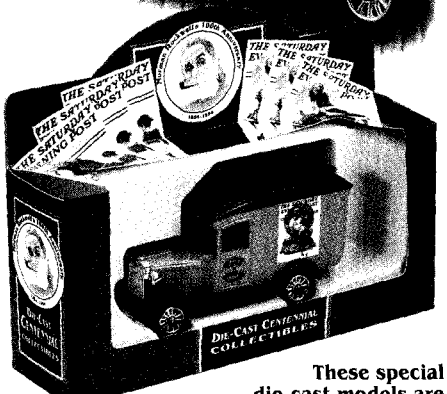
Through the famous covers of *The Saturday Evening Post* Norman Rockwell used his masterful talent to enlighten us all with impassioned and heart-warming illustrations of life in America.

Six of the best-loved covers are reproduced in glorious color on both side panels of these highly collectible metal models, replicas of vehicles used to deliver *The Saturday Evening Post*. Even the year of each model is in keeping with the date of the cover.

This special Centennial Collection is rich in detail with a deep enamel paint finish and moving wheels. It has been made with pride and precision to celebrate the distinguished work of Norman Rockwell and his inspired partnership with *The Saturday Evening Post*.

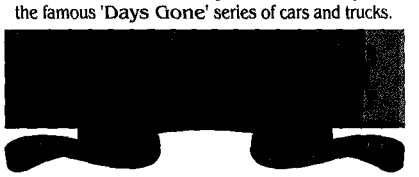
Models are approximately 3½in. in length and 1½in. high.

MADE IN ENGLAND, ASSEMBLED BY HAND & COLLECTED THROUGHOUT THE WORLD.



These special die-cast models are presented in the Norman Rockwell – Saturday Evening Post Centennial Box.

The Norman Rockwell–Saturday Evening Post Centennial Collection is manufactured by Lledo PLC and is part of the famous 'Days Gone' series of cars and trucks.



COLLECTIBLE DIE-CAST MODELS MADE IN ENGLAND

YOUR SET FOR LIFE

CALL 1-800-558-2376

Monday thru Friday 8AM-5PM EST

TO PLACE YOUR ORDER VIA MASTERCARD OR VISA OR SEE ATTACHED ORDER FORM TO MAIL IN ORDERS.

SATISFACTION GUARANTEED

If you wish to return any purchase you may do so within 30 days of your receipt of that purchase for replacement, credit or refund.

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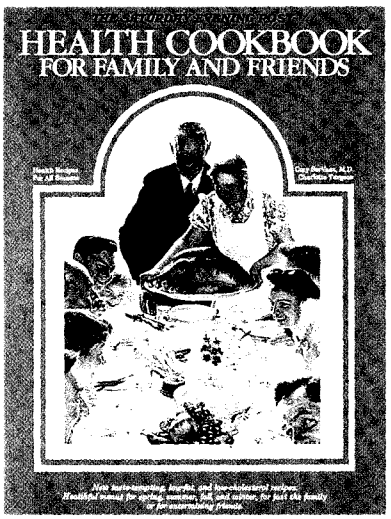
Not Another Cookbook!



Well...yes, but not just *any* cookbook. *The Saturday Evening Post Health Cookbook for Family and Friends* is unique because its 112 pages are sprinkled with illustrations from the pages of the *Post*, many by Norman Rockwell. There are more than 120 recipes, each of which are low in fat and sodium and high in fiber. These recipes are divided by seasons: lighter fare for the warmer months and hearty meals for when the chill winds blow. In addition, some recipes are designed to serve intimate luncheons for four, while others can serve buffet dinners for up to 12. Also, you won't have to worry that your guests might find these meals bland.

Here is a tempting sample of what you'll find as you turn the pages: Baked Trout with Herbs, Parmesan Asparagus, and Deviled Rock Cornish Hen. Plus, there's Chilled Cucumber Tarragon Soup, Vidalia Butternut Squash, and Light Raspberry Mousse. All of them are not only delicious, but healthy as well!

You can add this cookbook to your collection by sending a check or M.O. for $6.95, plus $1.50 for shipping and handling to: AFPM, P.O. Box 1144, Indianapolis, IN 46206 (Buy another because it makes a great gift, too!)

Bon appétit!

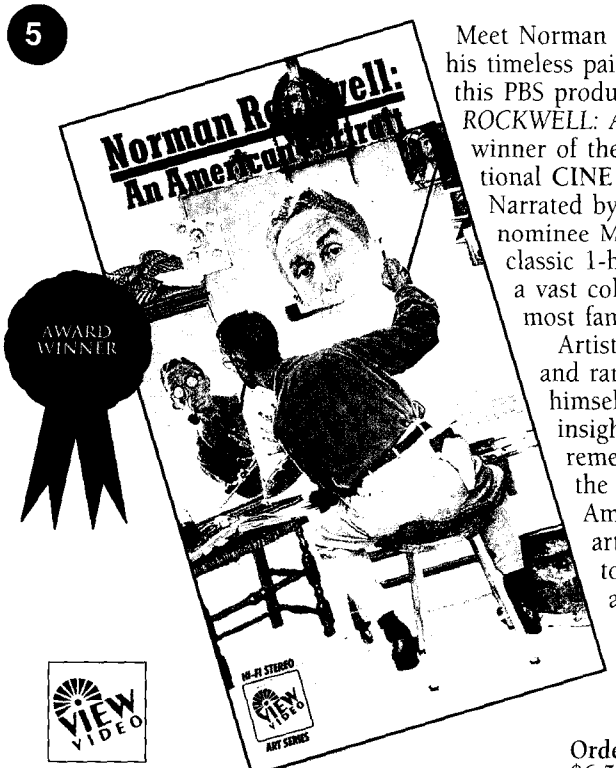
15 Make It A Rockwell Christmas

Glossy Gift Bags to Give or to Keep

Norman Rockwell's *Saturday Evening Post* Christmas covers come alive on shiny Jeanmaire® gift bags. Deluxe gift bags have macramé handles and fold-over gift cards. Five sizes in the set include super jumbo, jumbo, large, regular and tall. Give them at Christmas, keep a collector's set for yourself. $15.00 first set, including p&h. Two sets for $27.00, including p&h. For wholesale inquiries, call: 918-663-4211.

THE AWARD WINNING VIDEO

5



Meet Norman Rockwell and watch his timeless paintings come to life in this PBS production, *NORMAN ROCKWELL: An American Portrait*—winner of the prestigious international CINE Golden Eagle Award. Narrated by 3-time Emmy Award nominee Mason Adams, this classic 1-hour program features a vast collection of Rockwell's most famous works.

Artists, historians, friends and rare footage of Rockwell himself offer fascinating insight and heartwarming remembrances, celebrating the life and work of America's best-loved artist. A timeless video to be cherished time and again.

ONLY $19.98+
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Norman Rockwell
Reflections of a Master

Celebrate the birthday centennial of this beloved artist with a specially-priced Plate & Figurine Gift Set.

With his vivid portrayals of everyday life, Norman Rockwell created a classic American art form. Through his cherished depictions of small-town America at work and at play, he embraced meaningful moments from ordinary lives.

Introducing a wonderful opportunity to own one of Rockwell's most whimsical works, recreated in a collectors' limited edition. His unique *Triple Self-Portrait* is now beautifully recaptured with this magnificent plate and matching porcelain figurine set.

This set is the perfect addition to any Norman Rockwell memorabilia collection, and it's available now in limited quantities for just $145.00 (plate and figurine are sold separately for $55 and $100, respectively).

The plate is made in the USA of exquisite bone china and measures 10-1/4" in diameter. The matching porcelain figurine is a masterful, three-dimensional interpretation of the original illustration, and stands 4-1/2" high. This special gift set will recall fond memories for generations of Rockwell lovers to treasure for years to come—so don't miss the chance to order yours now!

Goebel

United States
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Pennington, NJ 08534-0010
Phone Toll Free: 1-800-366-4632

Triple Self-Portrait
plate: 10-1/4", figurine: 4-1/2"

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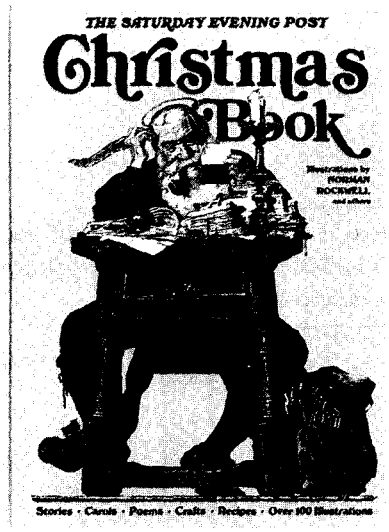
The Saturday Evening Post Christmas Book



Sometimes touching, sometimes humorous, always entertaining. This 144-page, hardcover, 9"x 12" book offers the finest Christmas stories by such authors as Charles Dickens, Laura Ingalls Wilder, O. Henry, Hans Christian Andersen, and Washington Irving, among others. More than 100 beautiful, full-color illustrations by Norman Rockwell and other famous *Post* artists bring these enchanting stories from the pages of *The Saturday Evening Post* to life. The volume—which also includes songs, tasty recipes, and craft projects for decorating your home—makes a great gift. On the other hand, you might want to get one for yourself and enjoy a little Christmas cheer!

To get *The Saturday Evening Post Christmas Book*, send your name and address with a check or M.O. for $12.95, plus $3 postage and handling, to: AFPM, P.O. Box 1144, Indianapolis, IN 46206.

***Hurry!* Quantities are now limited.**

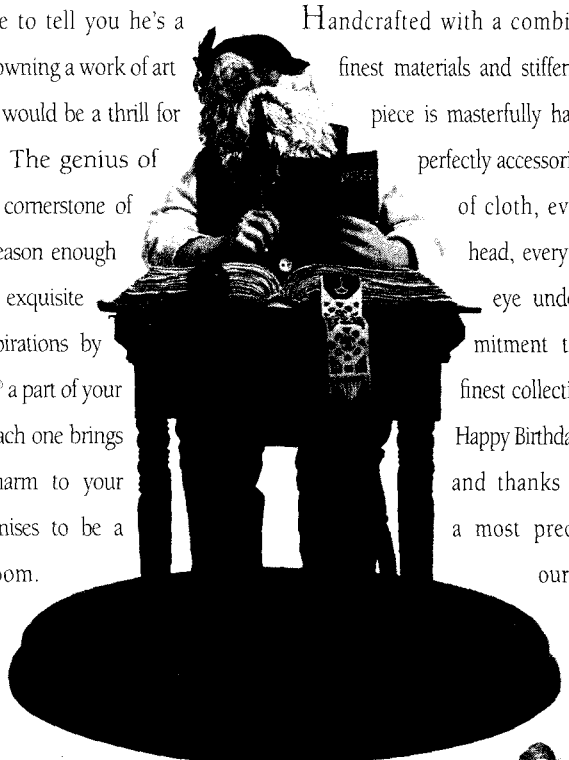
IT'S ROCKWELL'S BIRTHDAY, BUT YOU GET THE GIFT.

8

Make a wish for these gorgeous Clothtique® originals inspired by the Saturday Evening Post covers by Norman Rockwell.

We don't have to tell you he's a legend. Or that owning a work of art inspired by him would be a thrill for any collector. The genius of Rockwell is the cornerstone of American art. Reason enough to make these exquisite Clothtique® inspirations by Possible Dreams® a part of your life right now. Each one brings warmth and charm to your home and promises to be a priceless heirloom.

Handcrafted with a combination of the finest materials and stiffened cloth, each piece is masterfully handpainted and perfectly accessorized. Every fold of cloth, every tilt of the head, every twinkle in the eye underlines a commitment to present the finest collectibles anywhere. Happy Birthday, Mr. Rockwell and thanks for capturing a most precious time in our history.



A • BALANCING THE BUDGET
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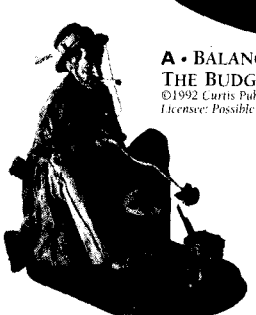

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C • THE MARRIAGE LICENSE
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D • LOVE LETTERS
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A. "BALANCING THE BUDGET" is 11 inches in height—$100
B. "HOBO" is 11½ inches in height—$130
C. "THE MARRIAGE LICENSE" is 11¼ inches in height—$160
D. "LOVE LETTERS" is 11 inches in height—$140

$5 is required for each item to cover shipping and handling.

To order one or more Clothtique® Originals (they make wonderful gifts), simply fill in section number 8 on the order form at the end of the Collector's Gift Guide (along with your name, address, and payment information in the spaces provided on the order form), fold it as indicated, apply postage, and drop the form in the mail. It's just that easy. Your Clothtique® originals by Possible Dreams® will be on their way to you within 6 weeks. For faster service, have your credit card ready and dial 1-800-558-2376 to place your order.

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17

Just $19.95

See Christmas through the eyes of America's most beloved artist!

Join Eddie Albert and Ross Malinger as they host this nostalgic, heartwarming look at the illustrious world of Norman Rockwell. Lift your spirits with this Christmas adventure you'll watch again and again!

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Add $4.95 S&H per order (CA and IL residents add tax).
Canadian orders must pay in U.S. funds plus $9.95 S&H.

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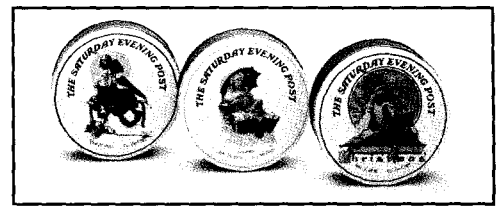
13

Rockwell Cookie Tins and Canister Sets

Norman Rockwell's enduring images captured forever in durable decorative metal tins. Proudly displaying the hand work of America's most beloved artist, these tins are perfect for the kitchen, playroom, den or office.



Three different Rockwells in each set for only $8.95 per set...but SAVE and get BOTH sets for just $15.95. That's six **ROCKWELL** illustrations for you forever on these classic, timeless tins.

Get several sets for gifts and let friends and family join you in celebrating **ROCKWELL'S** 100th birthday.

USCAN
United States Can Company
8901 Yellow Brick Road, Baltimore, Maryland 21237
(410) 686-6363 Fax (410) 391-9323

14

Norman Rockwell Tapestry Pillows

1A - 100 Years of Baseball
Actual size of all pillows—17" x 17"

1B - Bottom of the Sixth

1C - Triple Self-Portrait

1D - Girl in the Mirror

Norman Rockwell's most cherished and famous paintings are meticulously reproduced on cotton tapestry pillows. These Norman Rockwell pillows will become collector's items. Perfect for living room, den, bedroom, family room, boy's room, girl's room, office and work place.

The perfect gift for Christmas, birthdays and special occasions. The pillows are 17" x 17", corded and reverse to 100% cotton. One pillow at a time for just $25.00, or choose any combination of four for only $20.00 each, plus $5 postage and handling for each order.

As a bonus for this special occasion, with the purchase of a set of four pillows, receive a surprise fifth* pillow FREE!

* We reserve the right to choose which pillow will be sent free of charge from our selection of pillow designs. Some may not be shown here.

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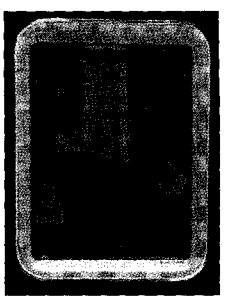
Actual size 16"x12" **8B**

THE SATURDAY EVENING POST COLLECTION OF NORMAN ROCKWELL CLASSICS

18

Celebrate the 1994 Centennial Anniversary of Norman Rockwell. Available for the first time ever, this delightful selection of Norman Rockwell paintings once captured on the covers of The Saturday Evening Post, now beautifully reproduced in full-color on a series of high quality serving trays. Suitable for any occasion, these unique and durable art pieces are also impact resistant and washable. They're perfect for gifts, displaying and collecting.

Send away today for these Norman Rockwell Classics. With our special introductory offer you can purchase one at a time for $11.95 each, or choose any combination of 2 or more for just $9.95 each plus shipping and handling. Mail the coupon to Armchair Shopper, P.O. Box 130, Indianapolis, IN 46206.



6B

7B

9C

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Armchair Shopper, P.O. Box 130, Indianapolis, IN 46206

❑ **Please send me the Norman Rockwell Classics at the price of only $11.95 ea. or $9.95 ea. for two or more. Please allow 2 weeks for delivery. Each one is UNCONDITIONALLY GUARANTEED to please you or you may return them within 90 days for a prompt refund, including applicable postage and handling.**

How Many?_____ 8B_____ 6B _____ 7B_____ 9C

Amount_____ +$5.00* shipping and handling = Total_____

❑ My check or money order is enclosed. Bill to my ❑ VISA ❑ MasterCard

Card Number_____ exp. date____/____

Signature_____

Name_____

Address_____ Apt#_____

City_____ State____ Zip_____

❑ Enclosed is my self addressed, stamped envelope. Please send me a catalog and literature.

*Shipping & Handling is $5.00 for up to 12 art pieces. 494

Send in your order today!

Only $9.95 plus $1.50 shipping and handling.*

Size: Open 11" x 22". Closed 11" x 11".

Enjoy the Master's Artwork Every Day of the Year!

19

Celebrate the 50th anniversary of the end of World War II with the Norman Rockwell Limited Edition WW II Commemorative 1995 Calendar.

This exclusive, limited edition Rockwell calendar is a gallery of paintings that depict the skill of America's best-loved artist and the heroism, warmth, and self-sacrifice of those on the home front. This nostalgic calendar covers a period of time from the early days of the conflict through its end, with corresponding events of the war described in each date block. Accompanying each painting are actual photos showing a related scene from the era. The descriptive copy is historically accurate and insightfully written, and complements Rockwell's masterful paintings depicting human weakness with grace, mercy, and humor.

Norman Rockwell Collectibles

P.O. Box 1144, Indianapolis, IN 46206

or call 1-800-558-2376

❒ Yes! Rush me the Norman Rockwell Limited Edition WW II Commemorative 1995 Calendar for only $9.95 plus $1.50 shipping and handling.*

Name _____

Address _____

City _____ State _____ Zip _____

❒ My check or money order is enclosed.

❒ Bill to my ❒ VISA ❒ MasterCard.

Card Number _____ Exp. Date _____

Signature _____

* IN, WI, TX, MS, FL, KY, OH please add appropriate sales tax. Please allow 3 weeks for delivery.

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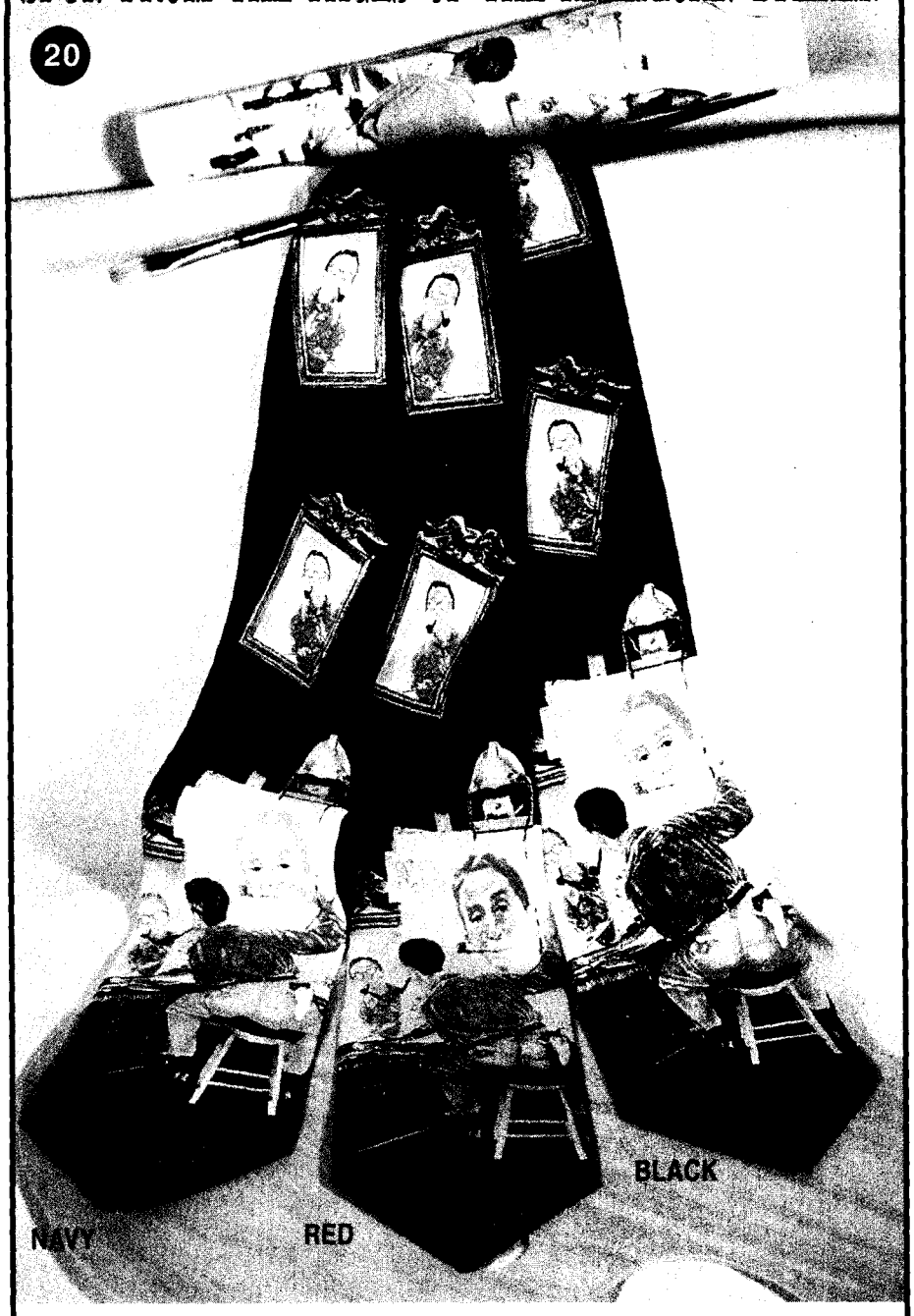
SPUN FROM THE PAGES OF THE AMERICAN DREAM!

20



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13 Norman Rockwell Tins & Canisters	To order Cookie Tins or Canister Sets, check the appropriate box(es). ❑ Cookie Tin—$8.95 ❑ Canister Set—$8.95 ❑ Both sets $15.95. Make a check or M.O. payable to: *USCAN (410-686-6363).*
14 Norman Rockwell Tapestry Pillows	To order tapestry pillow(s), check the appropriate box(es). ❑ 1A—$30 ❑ 1B—$30 ❑ 1C—$30 ❑ 1D— $30 ❑ Any 4 pillows—$85 Make check or M.O. payable to: *Fashion Pillows (404-775-4121).*
15 Glossy Gift Bags	To order Gift Bags, check the appropriate box(es). ❑ One set of 5 bags—$15 ❑ Two sets, 10 bags total—$27 Make a check or M.O. payable to: *Jeanmarie Creations (918-663-4211).*
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Prevarication Jones

continued from page 84

"I trust, Mr. Jones," said the boy's father, "that you will forgive me for my doubts and stay here with us in Platts Landing and school the youngsters. We'd be proud to have you, if you are so minded."

Prevarication Jones looked straight at Mr. Platt and then reached a trembling hand out for the letter. He read it through in silence himself and put it carefully inside his deerskin tunic.

"June 17th, 1775," he said suddenly and fiercely, and launched again into the tale of the Battle of Bunker Hill, told with all his old vigor.

He'll be our schoolmaster then, said the boy to himself.

And suddenly he was filled with a great surge of love not only for Prevarication Jones but also for his father and for another fine gentleman and soldier who lived hundreds of miles away, whose honor was beyond question, who had stood by his friend, and whose name was George Washington.

The Wild Man

continued from page 77

"Not really. We just had some problems. I'm sorry now. I ain't going to do it again."

"How many pills did you take?"

"I don't know. The whole bottle, I guess. They was Emma's pills."

"You know you almost died?"

"I'm glad I didn't."

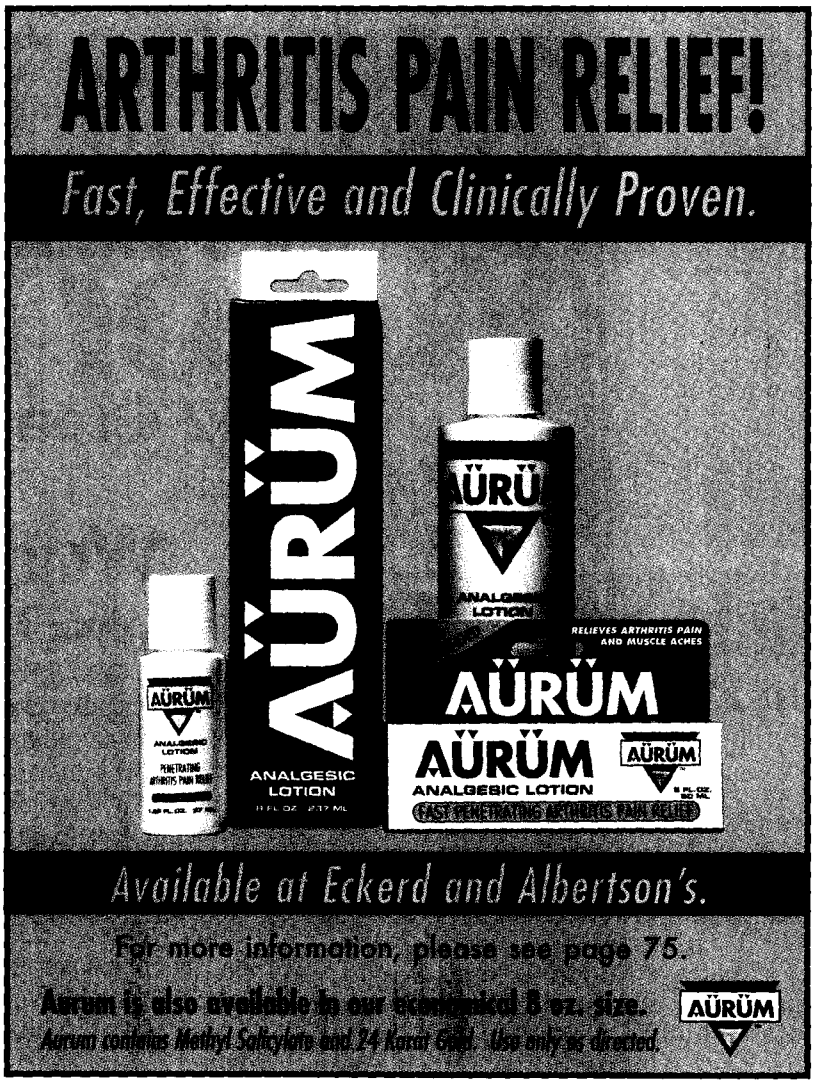
"We have to ask a psychiatrist to see you."

"OK."

Emma and two other family members come in next. Everyone is smiling, happy. We are all greatly relieved.

Mr. Cartney has no health insurance. The psychiatrist finds him to be clinically depressed, mainly over poor finances, lack of a job, and related woes. The entire family is on food stamps. He recommends that Mr. Cartney go to a county mental health facility. He does not believe Mr. Cartney is in danger of hurting himself again, at least not anytime soon.

The next day, three days after his arrival, we discharge Mr. Cartney to the recommended facility; while there, he receives some brief outpatient counseling, is deemed not suicidal by the county's psychiatrist, and is sent home.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About three months later, while making rounds in ICU, I am paged to the phone by Jed.

"Guess what, Dr. Martin. Mr. Joe Cartney, remember him? He was in the ED last night."

"Of course I remember him," I said. Not another overdose! I suddenly realize this cannot be, or I would have heard about it in ICU.

"No, no. He has a mild respiratory infection and just came in to get some antibiotics. He's actually doing OK. No major problems. I found out from one of the ED residents. Just thought you'd like the followup."

"Thanks, Jed."

Not bad for a man who almost died. Twice.

Dr. Martin is chief of the Division of Pulmonary and Critical Care Medicine, Mt. Sinai Medical Center, Cleveland. This is his fourth medical story to appear in The Saturday Evening Post.

Where Do You Think You Are?

(answers from page 84)
(Theme: Cities with Foreign Capitals)

1. Ottawa, MI	2. Cairo, GA
3. Lima, OH	4. Moscow, ID
5. Rome, NY	6. Paris, IN
7. Athens, TX	8. Tripoli, IA

9. Lisbon, ND

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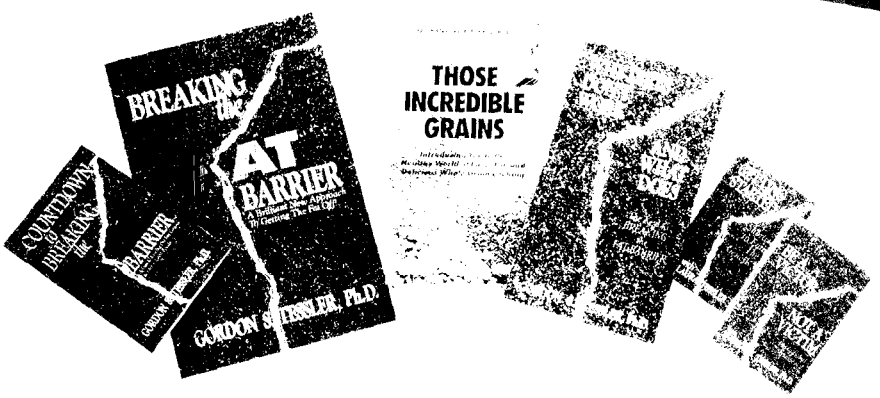

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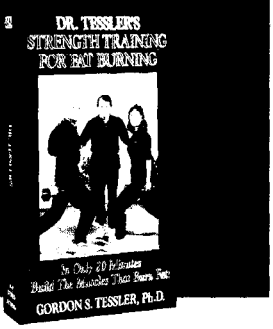

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